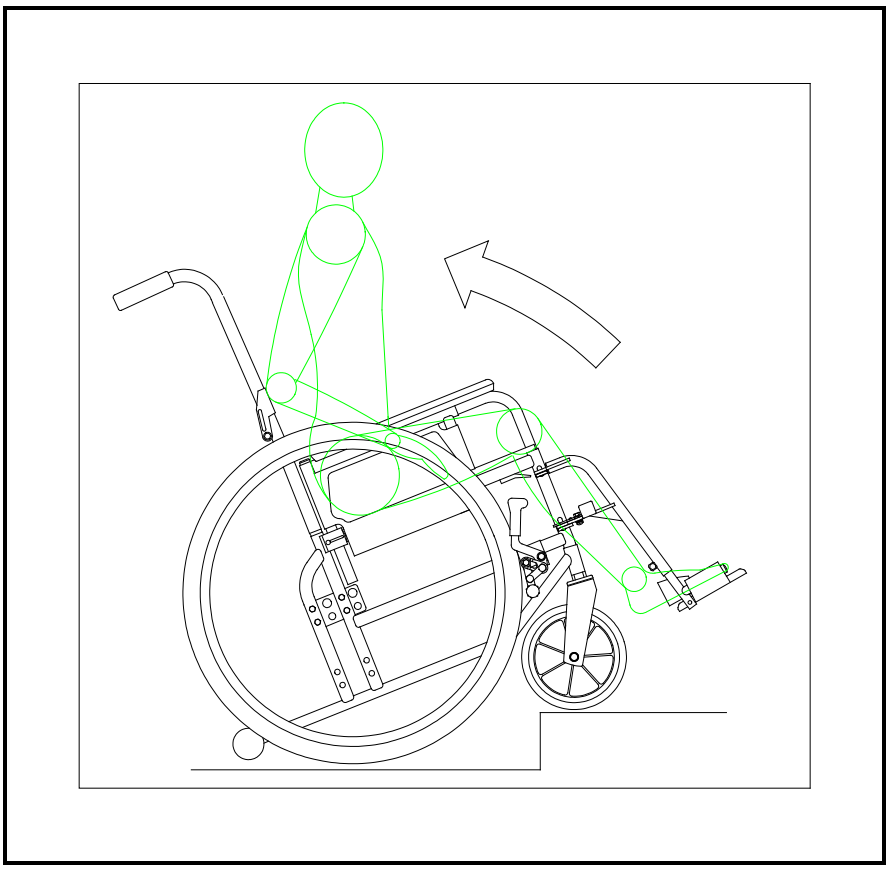
MODULAR WHEELCHAIR

ACCESS 06 J/A **Junior/Adult Wheelchair**
ACCESS 06 H **Adult Heavy Duty Wheelchair**
ACCENT 07 A **Adult Wheelchair**
ACCENT 07 H **Adult Heavy Duty Wheelchair**



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User Guide and Information

THIS INFORMATION IS APPLICABLE TO R HEALTHCARE MODULAR WHEELCHAIRS. IT SHOULD BE READ BY BOTH OCCUPANTS AND CARERS WITH ALL OTHER INFORMATION SUPPLIED BEFORE ANYONE ATTEMPTS TO USE THE CHAIR

THE PURPOSE OF A WHEELCHAIR IS TO PROVIDE FUNCTIONAL MOBILITY FOR PEOPLE WHO CANNOT, OR FIND IT DIFFICULT TO WALK.

Thank you for choosing a R Healthcare Modular Wheelchair. We hope you will find it suitable for your needs.

The R Healthcare Modular wheelchair is one of the many quality products produced by R Healthcare. It will give you many years of trouble free use if used according to the instructions provided.

This range covers modular features and options built into a complete wheelchair to meet occupant needs, as determined by clinical assessment. The benefits of modularity allow different features to be incorporated into a finished specification, which meets the assessed needs of the wheelchair user. The Access Fully Modular is the most adaptable specification, covering occupant sizes up to 160Kg. The Accent wheelchair incorporates seat depths of 19" and is beneficial for taller users. The wheelchair you have received has been built for you.

The User Guide is in two parts, each containing essential information, which must be read before attempting to use the wheelchair.

This first part of the User Guide has been designed to answer any questions users may have about the R HEALTHCARE MODULAR WHEELCHAIR FEATURES. The second part contains GENERAL GUIDANCE & SAFETY INFORMATION with lots of practical advice.

Users requiring more detailed advice about using the wheelchair should contact their Approved Distributor who has full service information manual and facilities. Very often, the need for a simple adjustment may be found after a short period of use, or alternatively the wide choice of build configurations available within the R HEALTHCARE MODULAR specification may allow the wheelchair to be reconfigured to improve its operation in line with the occupant / user need as this changes.

For more information about other products and adaptations available for the R HEALTHCARE MODULAR WHEELCHAIR, please contact our R Healthcare Customer Services Dept. All addresses are given in detail at the end of the User Guide.

TABLE OF CONTENTS

Part One – Modular Wheelchair Features

1.1	Introduction and Opening the Product Package	P4
1.2	Preparing the Wheelchair for use	P7
1.3	Footrests	P8
1.4	Brakes	P9
1.5	Wheels	P10
1.6	Balance control and Manoeuvrability	P11
1.7	Armrests	P13
1.8	Special Adaptations	P14
1.9	Warranty Information	P14
1.9.1	Anti Tipping Stabiliser post 01/01/13 fitting guide	P15

Part Two – General Guidance & Safety Information

2.1	Introduction	P17
2.2	Getting in & out of a Wheelchair facing forwards	P18
2.3	Side Transfer	P18
2.4	Brakes	P20
2.5	Pushing Techniques	P20
2.6	Kerbs	P22
2.7	Steps & Slopes	P24
2.8	Seatbelts (also posture belts)	P24
2.9	Occupant Controlled Mobility	P27
	Movement & Stability	P28
2.10	Transportation	P28
2.11	Fire Precautions	P32
2.12	General Precautions & Information	P33
2.13	Looking after your Wheelchair. General care & Maintenance	P34
2.14	Service Checklist	P35
2.15	Technical Data Sheets	P36

Please read all the information provided.

Additional information for Distributors, Service Centres, Assessors and Transportation providers, is contained in the Transportation Guide, and Controller guide, which are included in the wheelchair information pack. The Assessment Guide Lines and Technical Information Manual, are available from R Healthcare Customer Services.

1.1 Introduction & Opening the Product Package

The R Healthcare Modular range is available in different frame types as follows:

a. **Access** Fully Modular

   Has three different frame designs. Junior, Adult, and Adult Heavy Duty

b. **Accent** Fully Modular

   Has one frame type, covering adult and heavy duty, with build options to suit occupant and attendant operation.

The basic operational features of these models are similar, where there are specific differences these are indicated in appropriate sections of this guide.

The versatility of R Healthcare Modular wheelchairs provides for the fitting of a wide range of options and accessories across all models and sizes to meet ongoing wheelchair user needs.

For protection during transit your R Healthcare Modular wheelchair is packed in a cardboard carton, together with User Guidance Information.

Each wheelchair has its own specific identification code, which is on a label at the back of the chair. This code should also be noted on the Wheelchair Service Record, included in the information package supplied to users.

Take care that all information supplied is kept in a safe place for your future reference, with the Service Record available for the Approved Distributor to endorse at the recommended service interval.

Other cautionary information labels secured to the wheelchair are reminders for the user, not to be removed without reference to the Approved Distributor. Users are responsible for ensuring that the product is used safely and correctly.

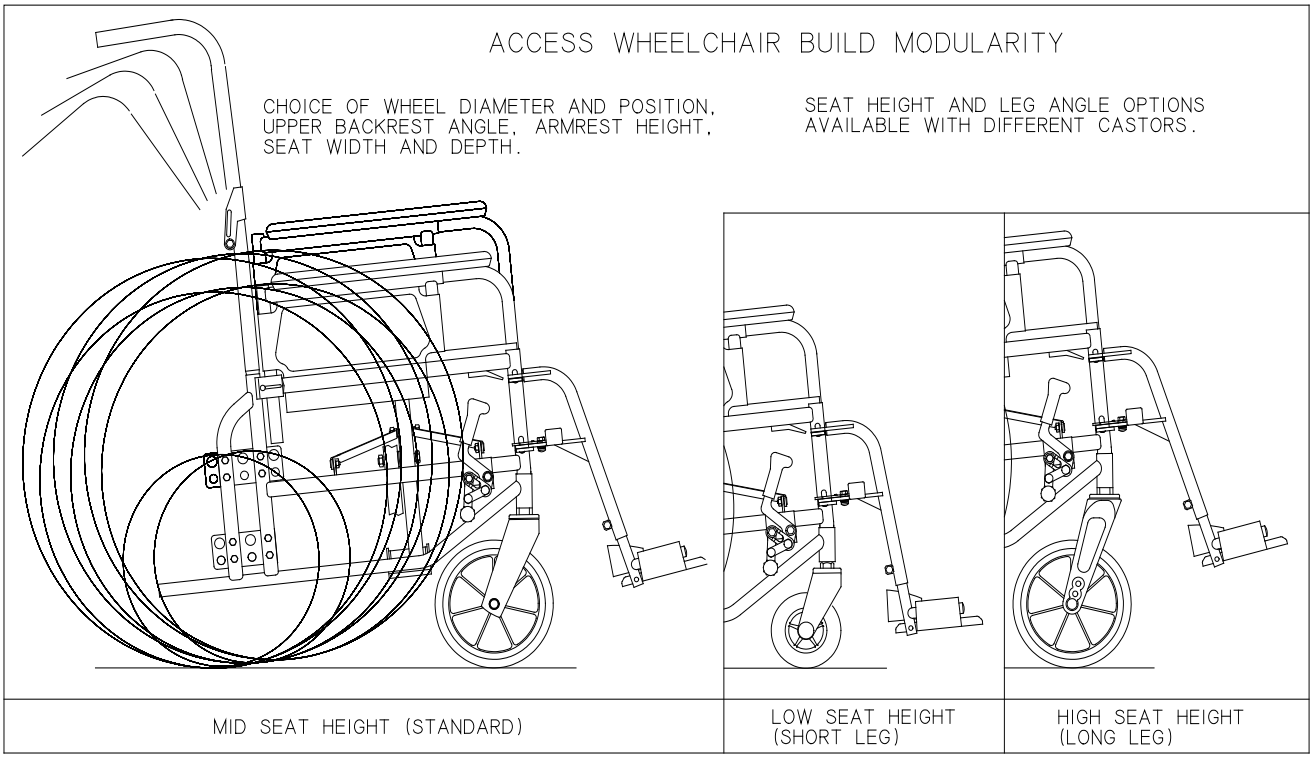
Packaging should be disposed of carefully and safely after initial period of use.

If after reading this information guide, you have and further questions or are uncertain on any aspect of the wheelchair, please contact your Approved Distributor or local Disablement Service Centre.

1.1.1 Diagrammatic of Wheelchair types

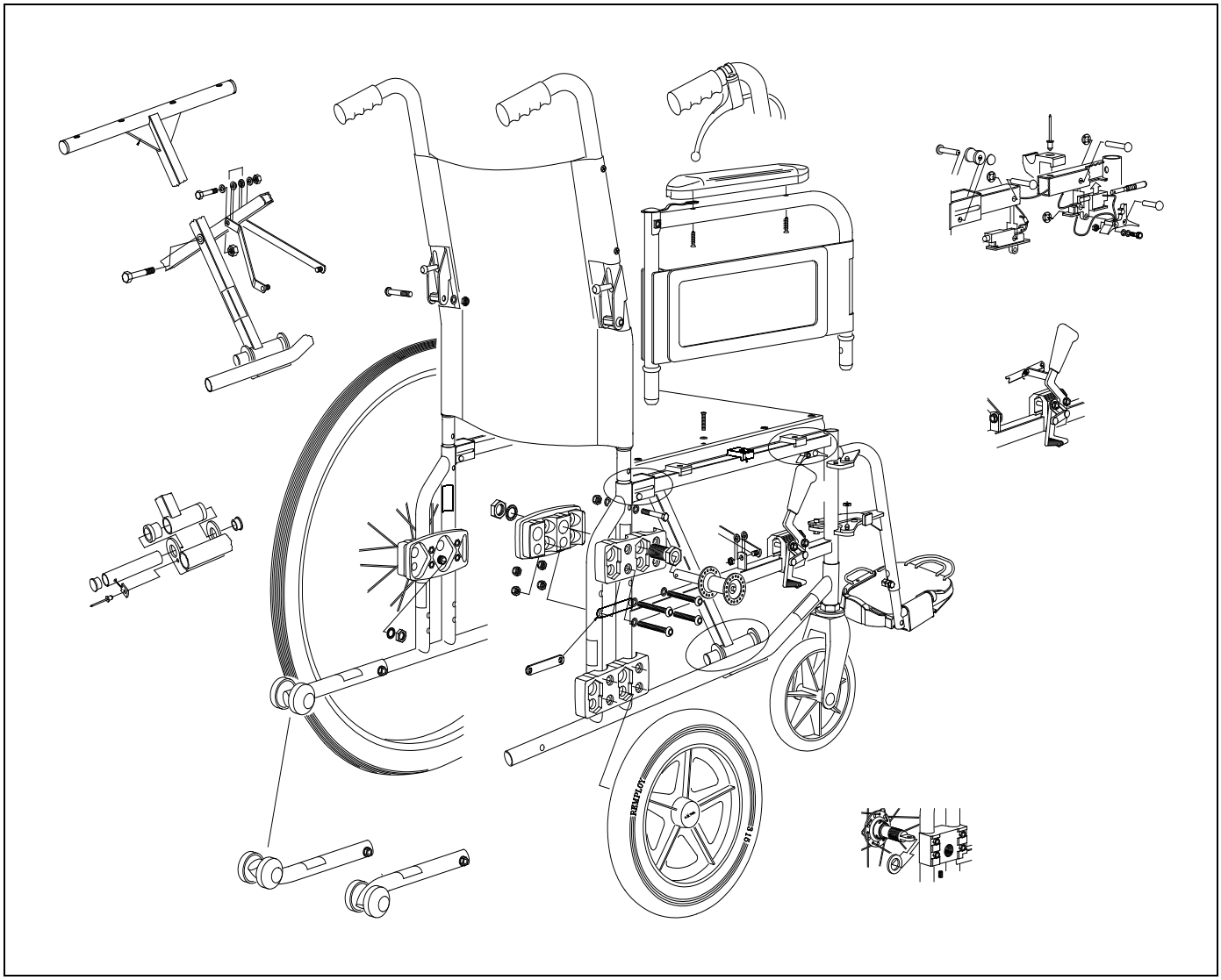
The following diagrams show the possible configurations of R Healthcare Modular wheelchairs.

R HEALTHCARE ACCESS FULLY MODULAR WHEELCHAIR


ACCESS WHEELCHAIR BUILD MODULARITY
CHOICE OF WHEEL DIAMETER AND POSITION, UPPER BACKREST ANGLE, ARMREST HEIGHT, SEAT WIDTH AND DEPTH.
SEAT HEIGHT AND LEG ANGLE OPTIONS AVAILABLE WITH DIFFERENT CASTORS.
MID SEAT HEIGHT (STANDARD)
LOW SEAT HEIGHT (SHORT LEG)
HIGH SEAT HEIGHT (LONG LEG)

Diagrammatic representation of modularity with choice of wheel and castor type and position, backrest angle, seat to ground height and leg angle, in addition to seat width, which tailor final build specification to meet clinical assessment of user.

R HEALTHCARE ACCESS FULLY MODULAR WHEELCHAIR

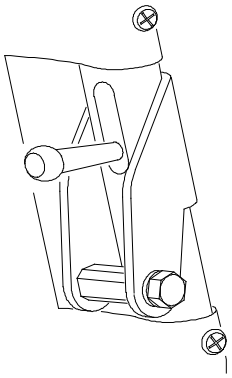


The diagram shows how additional features may be added to the Access Fully Modular wheelchair to extend or enhance performance in line with the requirements of the wheelchair user.

These include :

- Large Diameter Spoked Wheels
- 315mm Attendant Wheels
- One Arm Drive Mechanism
- Attendant Controlled Brakes
- Armrest Options
- Elevating Leg Rests and Stump Supports
- Height Adjustable Push Handles
- Anti-tip Stabilisers which must be fitted when rearward stability is measured at less than 10°
- Cushion Options
- Lap Belt
- Castor Options

1.2 Preparing the Wheelchair for use



OPENING THE WHEELCHAIR

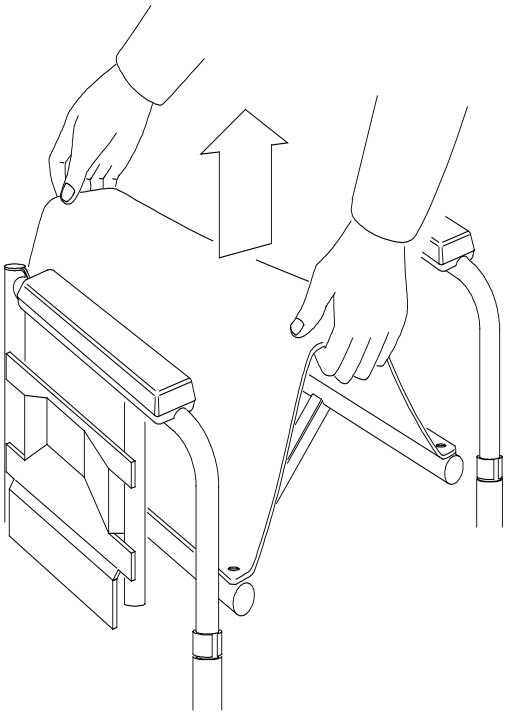
Grip the armrests and push them apart as far as possible. This may be made easier by tilting the wheelchair sideways slightly, so that one rear wheel is clear of the ground.

Put hands on the seat canvas with fingers pointing into the middle of seat.

Push down and out, with the flat of the hand on the two sides of the seat, until the chair is completely open.

Push footrests to swivel out and down to heel out.

All versions of the Fully Modular Wheelchairs have a folding backrest. To raise the backrest for use, lift both push handles upwards. Make sure that the backrest plungers then drop into position, as shown above, and are fully engaged before use.



CLOSING THE WHEELCHAIR

Remove any cushions.

To fold the backrest, slide up the backrest plunger knob located at the back of the hinge.

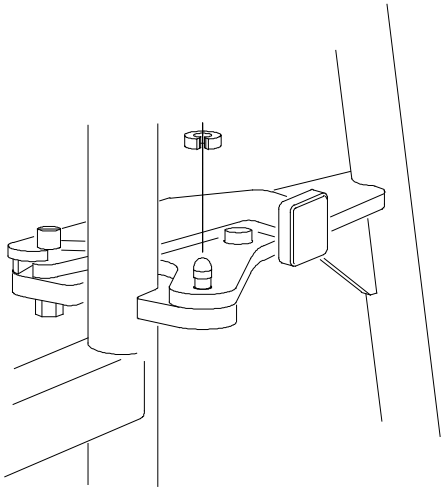
When both plungers have been released the backrest can be folded down.

For transit and storage, the footplates should be swivelled upright.

The moulded hinge allows this movement to be easily carried out by hand, whilst still retaining the upright position when folded.

Grasp the middle of the seat canvas at the front and back, and give a sharp pull upwards. Press the armrests inwards (together) until the chair is fully closed.

1.3 Footrests



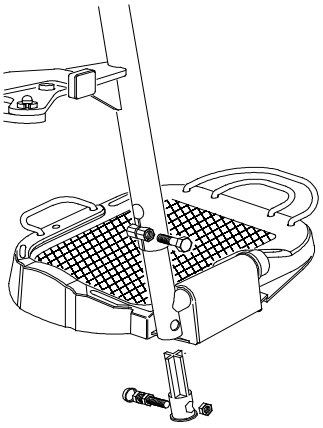
The R Healthcare Modular Wheelchair has detachable footrests.

These can also be pivoted round during side transfer, or close up manoeuvres.

To detach the footrests, remove the retainer and release the footrest latch.

The footrest can then be lifted off the pivot pins. If the footrests are to be left on when carrying the wheelchair in a car, the retainer should be replaced.

Remember to fully engage the locking latch after replacing the footrest.



Both the height and the angle of footrests on the R Healthcare Modular Wheelchair are adjustable.

The angle of the footplate is adjusted by a jacking screw at the base of the stem.

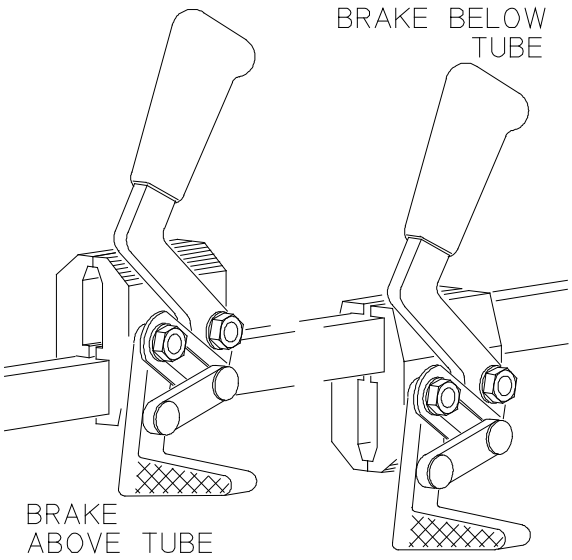
The height is adjustable by a clamp screw at the end of the pivoting footrest frame bracket.

Footrests settings are important.
A correctly set footrest height will help to spread the load of the occupant weight, easing pressure, and improving seating comfort.

The most comfortable seating position is usually obtained when the thighs are horizontal and the hips and knees are at right angles.

If in doubt about footrest settings contact the Approved Distributor.

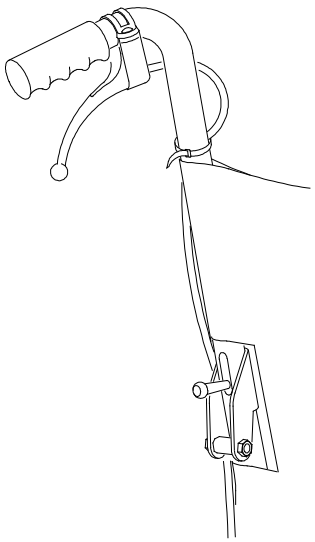
1.4 Brakes



BRAKES should exert sufficient pressure on the tyres to hold the wheelchair on a 10 degree slope.
Correct tyre pressure is important for correct brake operation

Braking position is adjusted by sliding it the along the brake mounting tube, and clamping to the frame where required

The brake may be mounted above or below the mounting tube, above on the Occupant Controlled versions to provide optimum handle position.



Attendant Controlled versions will usually have them fitted below.

Attendant hub controlled brakes can be fitted to chairs to assist safe operation, when the weight of the occupant is height compared to the strength of the attendant or where the environment is hilly.

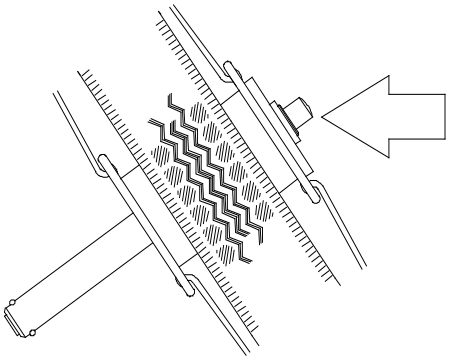
IF IN DOUBT ABOUT BRAKE SETTINGS CONTACT THE APPROVED DISTRIBUTOR

1.5 Wheels

MAKE SURE TYRES ARE CORRECTLY INFLATED TO 45 psi BEFORE USING THE WHEELCHAIR.

The R Healthcare Modular range is available with a wide choice of wheels and castors. All Attendant Controlled chairs, i.e. those with small wheels, and some Occupant Controlled chairs have wheels, which are permanently secured into the mounting block unit by a screwed spindle.

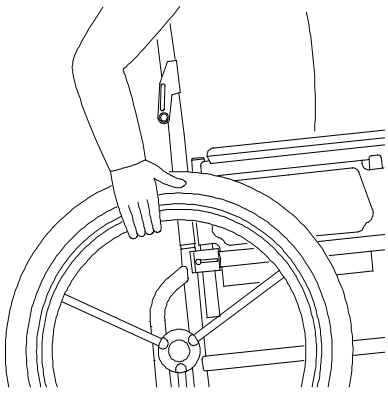
Occupant Controlled chairs are available with QUICKLY DETACHABLE wheels. These fit into a special receiver in the mounting block unit, and have a sprung loaded button feature, to allow the user to remove them easily.



Versions fitted with Q.D. wheels provide the user with an additional option to remove the wheels for transit.

When the wheels are removed, the lifting weight of the individual components is significantly reduced, and we recommend their use when the attendant person requires a little help in lifting the chair.

When removing or replacing Q. D. wheels the brakes should be in the off position. Depress the button in the centre of the hub and pull the wheel away from the wheelchair. To replace the wheel, depress the button in the centre of the hub and enter the wheel spindle into the mounting bush. Ensure that the spindle is fully located by pulling the wheel away from the wheelchair. Wheel security is very important.



An occasional lubrication of the spindle will ensure trouble free removal of the wheel.

The ONE ARM DRIVE version of the wheelchair has a special rear wheel, which has two handrims. The large outer handrim propels the wheel to which it is attached. The smaller inner handrim is connected via the wheel hub and linkage to the wheel on the opposite side of the wheelchair. The wheelchair is propelled by alternately pushing on the outer and inner handrim. Occupants whose hands are large enough may be able to push on both handrims at the same time.

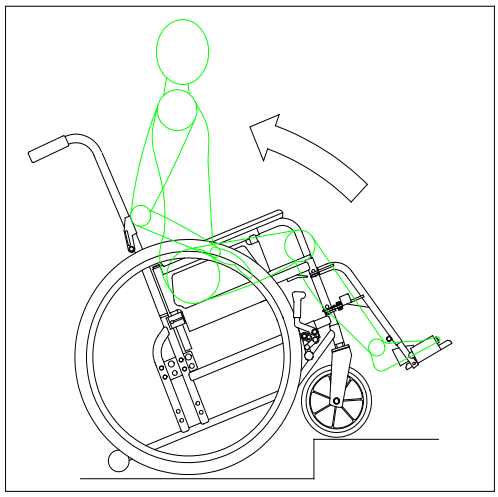
1.6 Balance Control & Manoeuvrability

The R Healthcare Modular range, allows rearward stability to be adjusted, making it easier to manoeuvre and tip the wheelchair backwards. This set up will be unstable for some users. Fitting stabilisers can be a safe alternative.

THE MODULAR RANGE WHEELCHAIR CAN BE ADJUSTED BELOW 10 DEGREES REARWARD STABILITY - STABILISERS ARE AVAILABLE.

DO NOT ADJUST STABILISERS PRIOR TO SPECIALIST ASSESSMENT.

A finely balanced wheelchair, with the centre of gravity of the occupant in line with the centre of the rear wheels, has advantages in better manoeuvrability.



In addition to this, the mechanical advantage of propulsion is at its most efficient level when at these settings.

A manoeuvre which demonstrates the ease of control in a finely tuned wheelchair is the "wheelie" technique which skilled users put to good effect when climbing kerbs.

Users should be aware that anti-tip stabilisers become less effective when the wheelchair is on an upward facing slope.

It is most important that the Assessment Teams are fully satisfied with user skills before allowing finely tuned balance settings, and removal of stabilisers. In some instances a helmet may be advisable for head protection in the event of reward tip-out.

The Fully Modular Wheelchairs range of balance positions incorporates possible setting from highly stable to energy efficient. Chairs configured with reward stability settings of less than 10° are initially supplied with complete anti-tip stabilisers.

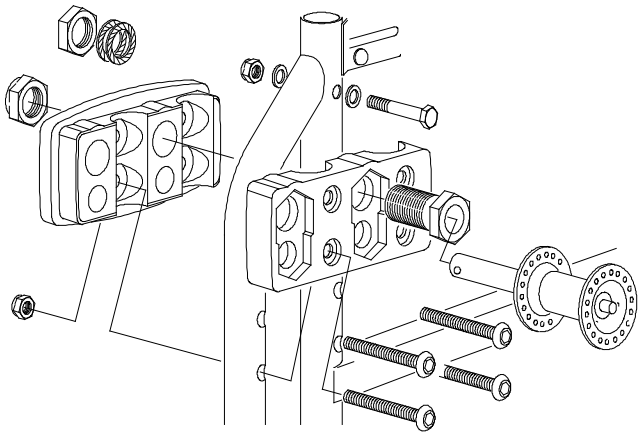
As needs change, it is possible to change the set up and specification. Fitting notes and illustrations shown here are for user guidance. We do not recommend that users undertake any kind of wheelchair configuration changes, without seeking professional advice.

This work should be undertaken by the Approved Distributor, or Specialist who has the necessary information on screw tightening torque's.

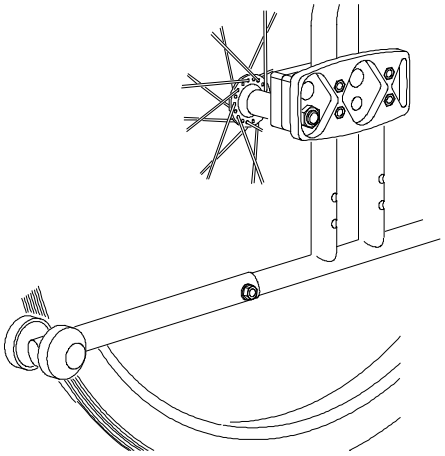
Wheels can be moved to facilitate changes to meet user need.

When setting wheel mounting positions always ensure that both wheels are positioned in corresponding holes on each side of the frame.

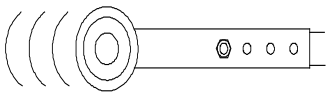
Rear wheels can be set back to achieve greater stability, but require more effort to propel and manoeuvre the wheelchair.



THE WHEELCHAIR IS SUPPLIED WITH WHEELS SET AS SPECIFIED DO NOT ADJUST PRIOR TO SPECIALIST ASSESSMENT.



Your wheelchair may be supplied with Anti-tip stabilisers which are secured to the lower frame tube by a self locking nut and bolt.
They also have a series of holes to allow for adjustment when rear wheel is repositioned.



Anti-tip Stabilisers allow the occupant to practice back wheel balancing and skilled manoeuvres.

Access Build Specification 6 & 11 Stability Conditions

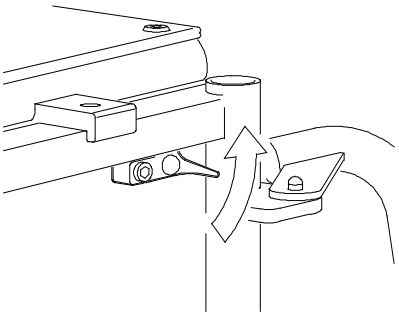
Wheelchairs configured in the rear wheel set back position for high double amputees, have a maximum stability of 4 degrees. Therefore where slopes of any nature are to be negotiated, we advise an attendant is in control of the wheelchair at all times. This type of wheelchair configuration is suitable for unattended indoor use only when being used by high double amputee.

When the wheelchair is being used by below the knee amputees or by a single leg amputee the chair is suitable for unattended indoor / outdoor use with a maximum stability of 8 degrees.

NB : Anti Tippers shown are compatible with chairs manufactured prior to 1st January 2013 for chairs manufactured after this date please refer to revised fitting instruction on page 16.

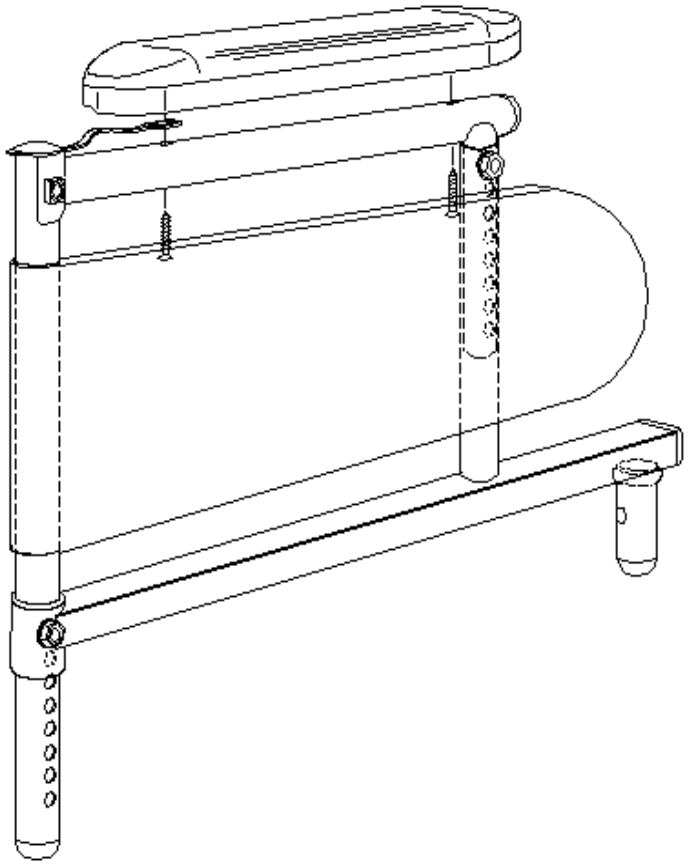
1.7 Armrests

The armrests are detachable for side transfer and storage or to reduce lifting weight.



To detach, pull back the catch trigger on the underside at the front corner of the frame until it clicks into the release position and lift out.

To replace, first make sure that the trigger is free to spring lock, and insert the armrest into the sockets at the front and back of the frame, then push down until the armrest clicks into position.



The R Healthcare Modular all round armrest locking security ensures that the armrest frame will not become accidentally detached from any of its locations.

The Modular Access Armrest is shown in the diagram. This has an adjustable height setting option by means of a series of locking holes in the frame at different heights.

When lifting the armrest out, hold it in the middle, do not try to force it, this may result in jamming.

1.8 Special Adaptations

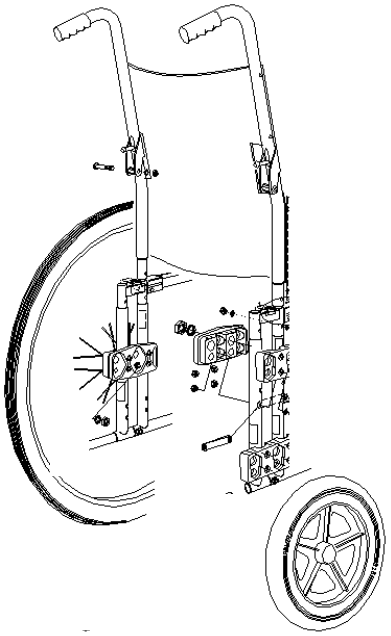
Modular designs make adaptation simpler. There are many rehabilitation adaptations, and other complementary products available for use on the R Healthcare Modular Range of Wheelchairs.

Our policy of continuous development is always adding to the list of items to improve the lifestyle and independence of our customers and users.

For further information on these, contact the R Healthcare Customer Services Department at the address shown on the end of this User Information Guide.

Modular wheelchairs which are supplied for custom seating systems or similar adaptations will include separate specific instructions for there use as indicated by clinical assessment.

Accent



Accent is a modified specification of the standard Access Fully Modular frame, which allows for the backrest position to be adjusted for a deeper seat depth. This facility is intended for applications where a back rest cushion or customised seating system is fitted. In such cases Access Plus may allow the occupant position to remain at the optimum for balance and propulsion with wheelchair forward and rearward stability to be maintained within the original specification, and eliminate the need for castor out rigged modifications or anti-tip stabilisers.

1.9 Warranty Information

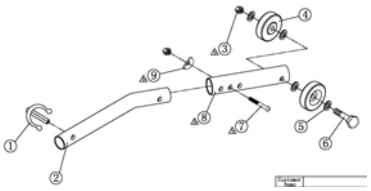
Please ensure that the operation of this product is fully understood. To avoid the risk of misuse consult your Approved Distributor, who has detailed product and service information, for further guidance if necessary.

R Healthcare Mobility guarantees the products supplied to be free from manufacturing defects, and will replace components where necessary free of charge, for a period of 24 months and frame defects for 5 years from the date of purchase.

This guarantee is subject to the condition that the product has been used, adjusted and maintained in accordance with the user and maintenance instructions supplied by R Healthcare Mobility.

This does not affect your statutory rights. A more complete warranty statement is available on request from the Approved Distributor.

Fitting Instruction – stabilisers – anti tip (Access / Accent 01/01/2013 onwards)



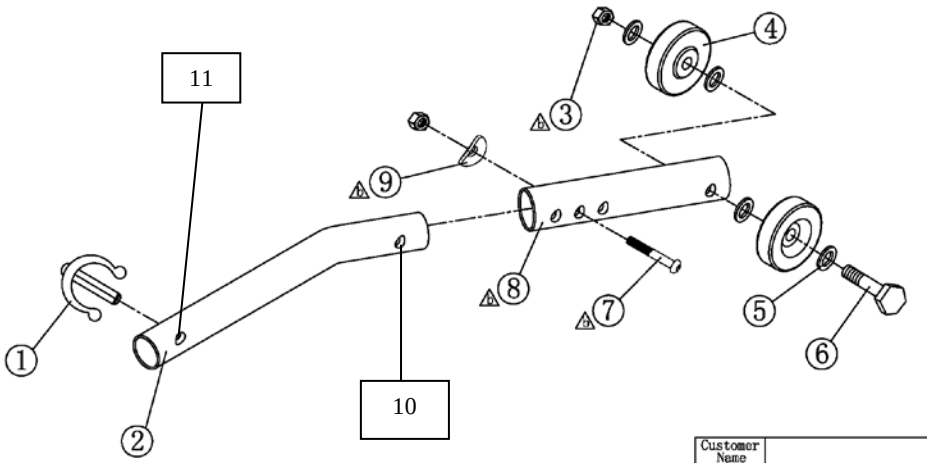
Part number
MSAWU1127

Where used
Access & Accent Self Propelled, Attendant Propelled
Curved stabiliser can be fitted with the wheel downwards and close to the floor, or upwards, method of fitting to be assessed dependent upon users and intended environment.

Tools and Techniques
The following tool will be required;
10mm A/F Open End Spanner

Damaged or worn, components need to be replaced, if assembled in pairs Remploy Healthcare recommends replace both assemblies, for continuity of wheelchair in use
. WARNING

1. Refer to stabiliser configuration table and check to see if fitted extension tube (8) is required.
2. If required move to point 3, if not required remove wheels (4) by lo0sing bolt (6) and nut (3). Remove extension tube (8) by losing bolt (7) and nut. Refit wheels (4) onto tube (2) by using bolt (6), washer (5) and nut (3) through hole 10. Tighten nut and bolt.
3. Fit Stabilisers (with or without extension tube (8)) inside bottom rail of wheelchair and secure using Pin (1) through hole in wheelchair bottom rail and hole (11) in anti-tipping stabiliser.
4. Ensure stabilisers stop wheelchair from tipping over backwards in fitted position before use.



Stabiliser Configuration Table

Wheel Type & Position	Standard Curved Stabiliser Items 1-6	Extended Curved Stabiliser Items 1-9	Hole Position
20” Wheel			
Forward	✓		
Mid	✓		
Extended		✓	Centre
22” Wheel			
Forward	✓		
Mid		✓	Centre
Extended		✓	Centre
24” Wheel			
Forward	✓		
Mid		✓	Centre
Extended		✓	Centre
315mm Wheel			
Forward	✓		
Mid	✓		
Extended		✓	Centre

MANUAL WHEELCHAIRS
GENERAL GUIDE AND SAFETY INFORMATION

Factors considered in selecting a wheelchair apply to both occupants and carers and include:

- method of propulsion
- seating position
- occupant size and weight
- physical ability of occupant and carer (where applicable)
- ease of use
- environment
- safety
- degree of independence
- transportation
- costs

Clinical Assessment teams have a responsibility to provide the wheelchair occupant and carer, where applicable, with a means of achieving effective mobility, bearing in mind all the above considerations.

There are many different types and variations of wheelchairs available today. It may not be possible to satisfy all requirements and environments with one chair for every need of the occupant (and carer) for home, travel or work.

2.1 INTRODUCTION

The type of wheelchair, and attachment features, provided will be different according to individual user requirements, and clinical assessment of need. In many cases the result will be a compromise solution.

Some modular wheelchairs can be set up or finely adjusted to suit user needs. Users should contact their approved distributor if they are having problem in using their wheelchair, a simple adjustment or alternative build configuration may help to resolve the problem.

R Healthcare manual wheelchairs can be divided into two broad categories.

- Attendant Propelled
- Occupant Propelled

This general information section covers safety issues of wheelchair use covering all of these.

Please read carefully together with all other information provided, covering the specific model supplied, which will give particular details of the wheelchair features and construction, methods of operation and correct setting methods.

2.2 GETTING IN AND OUT OF A WHEELCHAIR FACING FORWARDS

For maximum safety, these operations should be carried out with the help of an attendant. The occupant should always try to assist the attendant wherever possible to share the total effort.

Carers should not attempt to lift without help.
If this is not possible a hoist may be required.

Getting into the wheelchair.

Make sure that the brakes are on, flip up the footplates, taking care that the heel support straps (if fitted) are not jammed against the footrest support frame. On some models, footrests may be detached or swung away for easier access.

Note that when footrests are detached, the mounting swivels remain exposed, and care should be taken to avoid the occupant catching these accidentally.

The occupant may be able to help by pushing on the armrests to provide support whilst being lowered into the seat. Finally, push the footplates down, and locate the occupant's feet on them. **see fig 1.**

Getting out of the wheelchair.

Make sure that the brakes are on**,** then flip up the footrests or detach them. The occupant should place a hand on each armrest, bend slightly forward and place both feet well back and firmly on the ground, then push upwards to assist the carer.

2.3 SIDE TRANSFER

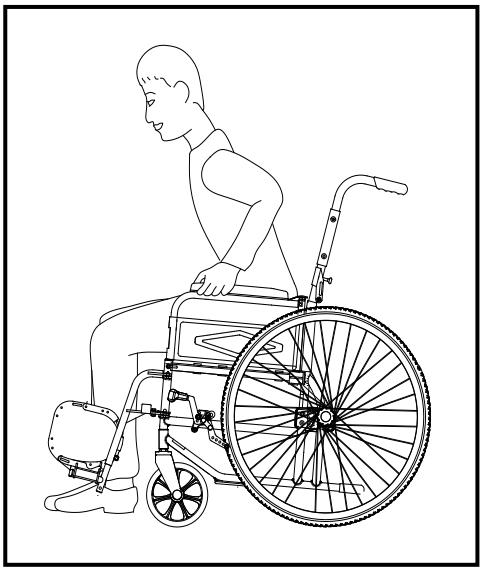
When the wheelchair armrest is removed, it will allow sideways entry to the chair and vice versa, from another chair or car seat. **see fig 2.** Physically active Independent users with upper body and arm strength should eventually develop skill to carry out this manoeuvre without help. However, it is advisable that an attendant should be available if assistance becomes necessary.

Make sure the brakes are on, or that the wheelchair is prevented from moving, It is easier to transfer when flip up footrest assemblies are swung back out of the way, or removed so as not to interfere with the legs. Fixed frame wheelchairs with foot bars, which do not have protruding brackets and footplates, allow side transfer without the need for footrest removal. Feet should be firmly on the ground and not on the footrest. The safest way to transfer is to bend slightly forward.

DO NOT ATTEMPT SIDE TRANSFER ON SLIPPERY OR UNEVEN FLOORS

If there is a gap between the two seat surfaces, it may help to slide along a smooth transfer board, or to use some other lever point such as a car hand grip for additional support whilst manoeuvring from one seat to the other.

Figure 1 - Getting in/out of the wheelchair



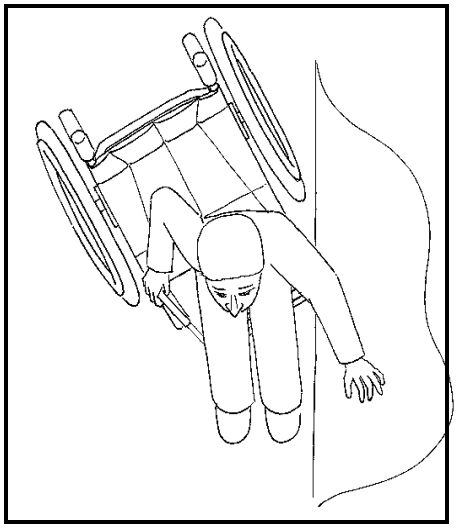
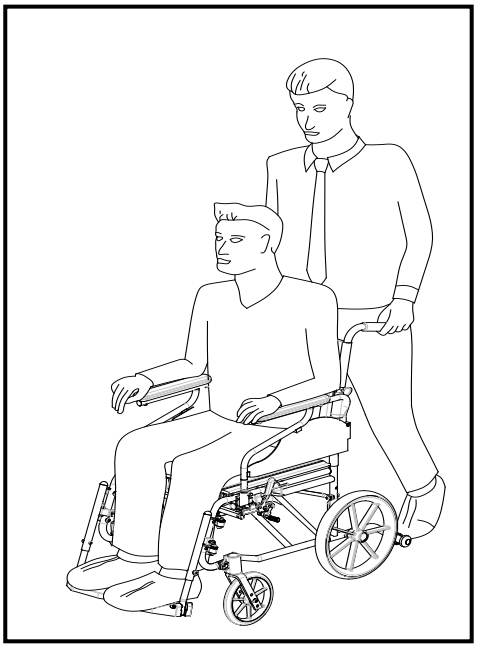
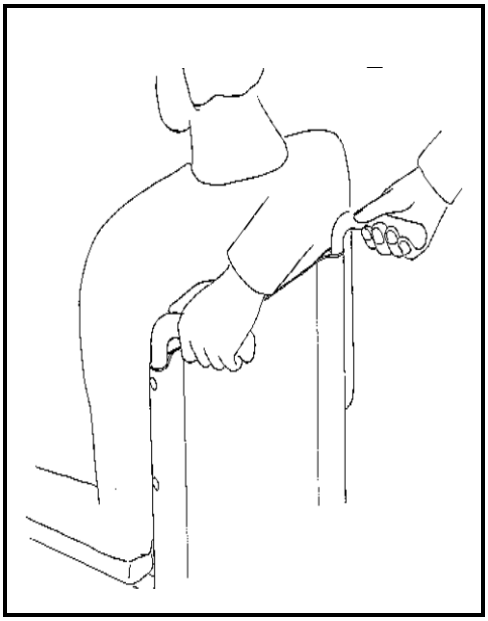


Figure 2 - Side Transfer

Figure 3 - Maintain a firm grip on the push handles





4 - Attendant Control

2.4 BRAKES

Hand brakes are provided for preventing wheel movement when parked, particularly on a slope, or during occupant transfer to and from the wheelchair. The action of a brake shoe pressing on the tyre makes correct inflation pressure important, see section 1.5.

Cable operated hub brakes are an option available for mounting on the push handles to allow the attendant to control the chair without having to reach down for the hand brake handle. These may also provide the attendant with a means of controlling the speed of a wheelchair when going downhill, and are a safety improvement on slopes and undulating terrain, as described in Technical Information Manual (Part B). Operating the wheelchair in this way however, demands that the attendant is skilled in the controlling operation, as a sudden change in direction will result if one wheel is retarded in advance of the other.

2.5 PUSHING TECHNIQUES

Pushing a wheelchair with a helpful occupant can be an enjoyment for both people involved provided that there is mutual confidence and understanding.

When first planning a trip, the pusher should check the distance and terrain to be covered, bearing in mind that a slope going out is a hill coming back. A combination of slope and camber is common in many areas. Try the chair out on typical surface conditions nearby, and practice manoeuvres likely to be encountered on a longer trip.

The pusher should be familiar with the operation of the wheelchair, remembering to put the brakes on and steady the chair before the occupant gets in and out. Where applicable, detachable features such as push handles and armrests should be checked for security, before setting out on a journey. The occupant should not be rushed during transferring in and out of the chair.

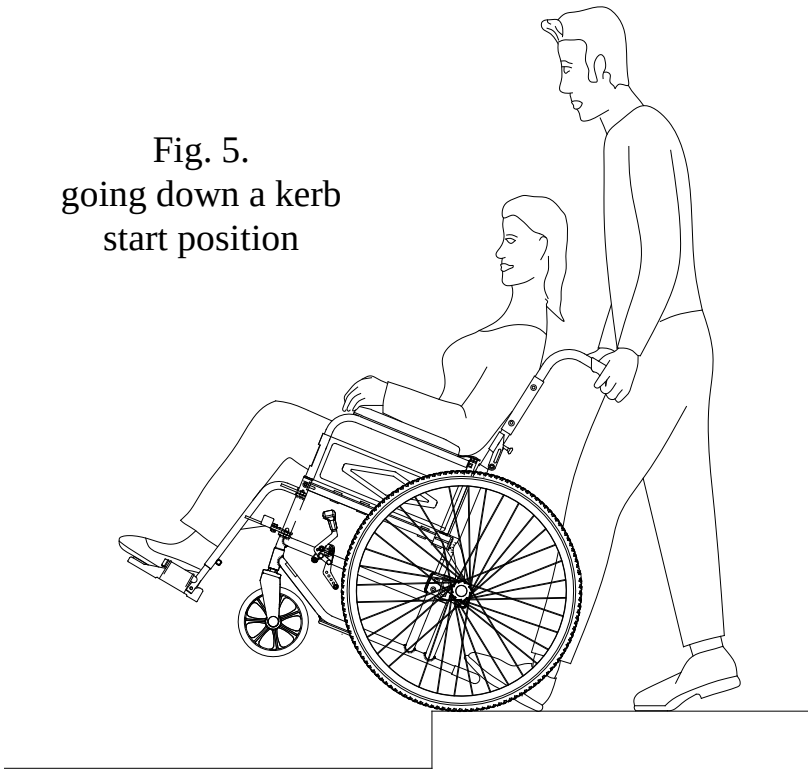
Before setting off, the pusher should make sure that the occupant is comfortable and that clothes, rugs, covers etc do not catch in the wheels or interfere with the general workings of the wheelchair.

The pusher should walk at a sensible speed, and tell the occupant before changing position, tipping the chair or manoeuvring, also paying attention to the surface conditions and avoiding uneven or soft ground wherever possible.

The pusher should always maintain a firm grip on the push handles. The chair should not be jolted or jarred, or rocked like a pram. **see figs 3 & 4.**

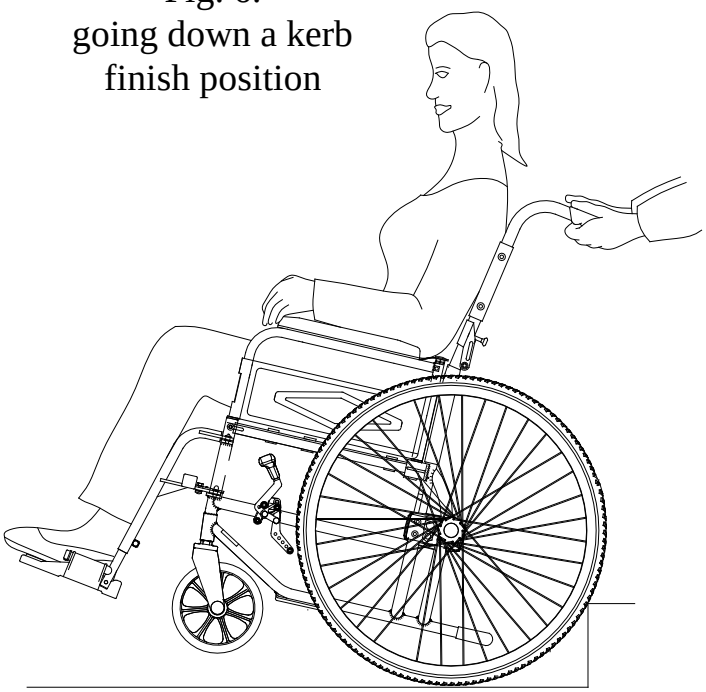
Shopping bags or other additional heavy loads should not be carried in a wheelchair unless specifically designed for the purpose. This particularly applies to hanging items over the push handles, which can overload the chair and affect stability resulting in injury if the occupant tips out of the chair when it is left unattended momentarily.

Fig. 5.
going down a kerb
start position



make sure that the front end of the chair is lowered slowly to the floor, and that the castors are pointing to the rear.

Fig. 6.
going down a kerb
finish position



castors with small wheels, are more liable to dig in, than large wheels, and require extra care in use.

2.6 KERBS

Negotiating a kerb.
The methods described here involve an attendant controlling the operation. Active users adopt balancing techniques carry out kerb manoeuvres independently, but methods will vary according to the setting of the chair, the physical strength of the user and skills acquired through training and practice with wheelchair experts. See section 1.6.

Going down a kerb:
The chair castors should be taken to the edge of the kerb. The pusher should hold the chair handles firmly, pressing down on the tipping lever and at the same time tilting the chair back. **see fig 5.**

The rear wheels can then be taken to the kerb edge and the foot removed from the tipping lever. The chair is then lowered down the kerb on its rear wheels, with the castor wheels facing rearwards, *this prevents them jamming up momentarily as the chair starts to move*, before pivoting the chair gently to the ground, to face direction of travel and then pushing forward.

Note: The chair must not be tipped forward or the occupant may fall out. When stabilisers have been fitted, this operation is more difficult to control, and extra care should be taken.

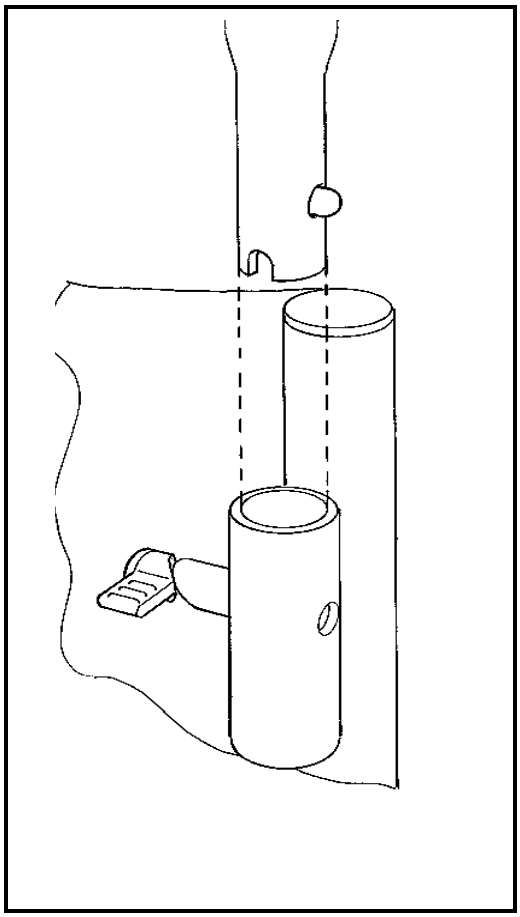
Going up a kerb. First method.
The chair footplates, or occupant feet if longer, should be taken to just in front of the kerb edge. The pusher should hold the chair handles firmly, pressing down on the tipping lever, tilting the chair backwards using body weight leverage, bringing chair forward till the back wheels touch the kerb.

The front castors wheels can then be lowered down onto the path, making sure that the wheels are facing rearwards. With the push handles held firmly the attendant should now lift and push the chair.

Going up a kerb. Second method.
The chair should be turned round so that the back wheels are against the kerb and the attendant should hold the pushing handles firmly and tip the chair backwards.

Using body weight as leverage the attendant should then pull the chair off the kerb and up onto the pavement, making sure, as above that the castor wheels are facing rearwards .

The chair may then be pivoted to face the direction of travel and pushed forward.



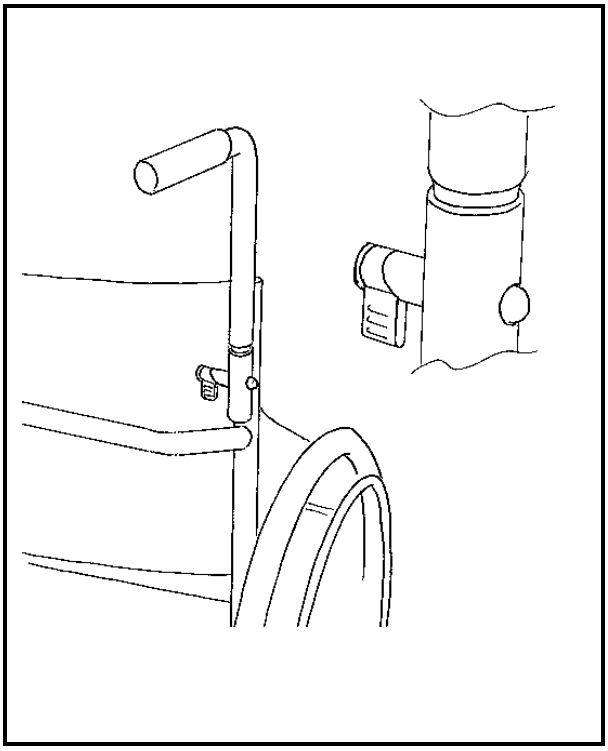


Figure - 7
Ensure that push handle
locks are fully engaged before using

Figure - 8
Detachable push handles must be inserted correctly

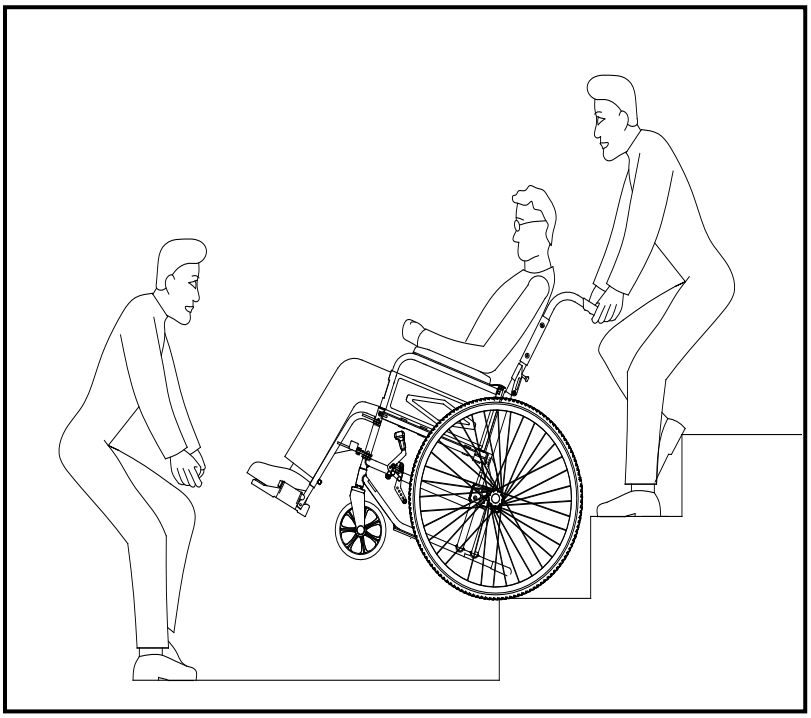


Figure - 9
Going down/up a flight of steps

2.7 STEPS & SLOPES

Where possible, the hazard of negotiating steps should be avoided. Modern public buildings should provide permanent wheelchair ramps, with a practical slope angle for safe access, loose ramps pushed against a kerb are not recommended. Learning the geography of an area is important.

A little journey planning can eliminate difficult manoeuvres. Many falls and injuries to both occupant and helper can occur when inexperienced people are carrying out this operation, and if users or carers are concerned about a particular hazard which they must regularly overcome, they should consult their local authority or community services department.

There may still be occasions when steps must be negotiated. **see figs 7, 8 & 9.**

In the event of the chair having detachable pushing handles, these should be checked for security in the locked in position before attempting this manoeuvre. Stabilisers may require removal if they interfere with the chair balance angle on a flight of steps. This should first be checked out with an unoccupied chair.

ENSURE THAT PUSH HANDLE LOCKS ARE ENGAGED BEFORE USE

Two attendants at least are required for this operation. The attendant supporting the main load should grip the chair at the push handles, and repeat the procedure as section 2.6 for getting down a kerb at each step, the second attendant at the front will be required to guiding the footrest area, and provide reassurance to the occupant. A third person could act as guide for the chair team if the steps are high. Reverse this procedure for going up a flight of steps, with the attendant supporting the main load at the push handles pulling, and the second attendant at the front guiding the chair using the corner of each side frame.

Specialist training for very experienced users to negotiate a flight of stairs independently is available, but this is beyond the context of this guide.

2.8 Seatbelts (also posture belts)

The fitting of these should be considered in all circumstances where the chair is used outdoors, over a sloping surface or kerbs. Belts normally secure the occupant by means of a quick release buckle in the centre. In cases where the seatbelt is part of the postural/ clinically assessed needs, provision of a seatbelt will be covered by a clinical assessment.

A basic security seat belt may become required after a period of use, if the environment or method of use changes, or where the occupant feels a need for greater security in the wheelchair. These can be fitted retrospectively by a fully trained and competent technician, but if unable to utilise any of these instructions, contact either your NHS rehabilitation engineer or the manufacturer of the wheelchair.

A correctly fitted posture belt should fit over a users pelvis at approximately 45 degrees from the anchor without obstruction from any part of the wheelchair (e.g. skirt guard or armrest). The posture belt should be adjusted so as to fit snugly around the users pelvis to provide an appropriate sitting position. The adjustment of the belt must be carried out by a competent person who is able to assess the clients needs and frequency of checking of the belt adjustment. Future reviews of an individuals needs should include consideration of the appropriateness of the posture belt and its method of adjustment, fastening and release especially where a users' or carers' capabilities change over time.

Lengthening or shortening, is affected by slackening and adjusting the webbing, as it passes through the male part of the fastener until the desired fit is obtained. When adjusted ensure the webbing is tightened, the buckle is located centrally, and the surplus webbing is secured by the tri-glide provided.

Inspection and maintenance of posture belts and their fittings should be included within the planned preventative maintenance programme for the wheelchair.

Wheelchair seatbelts are not tested to meet the crash test standards required for occupant restraint in a vehicle, but we advise that they should remain in position during a journey to provide occupant security, and support during normal traffic movements of sideways cornering and speed changes.

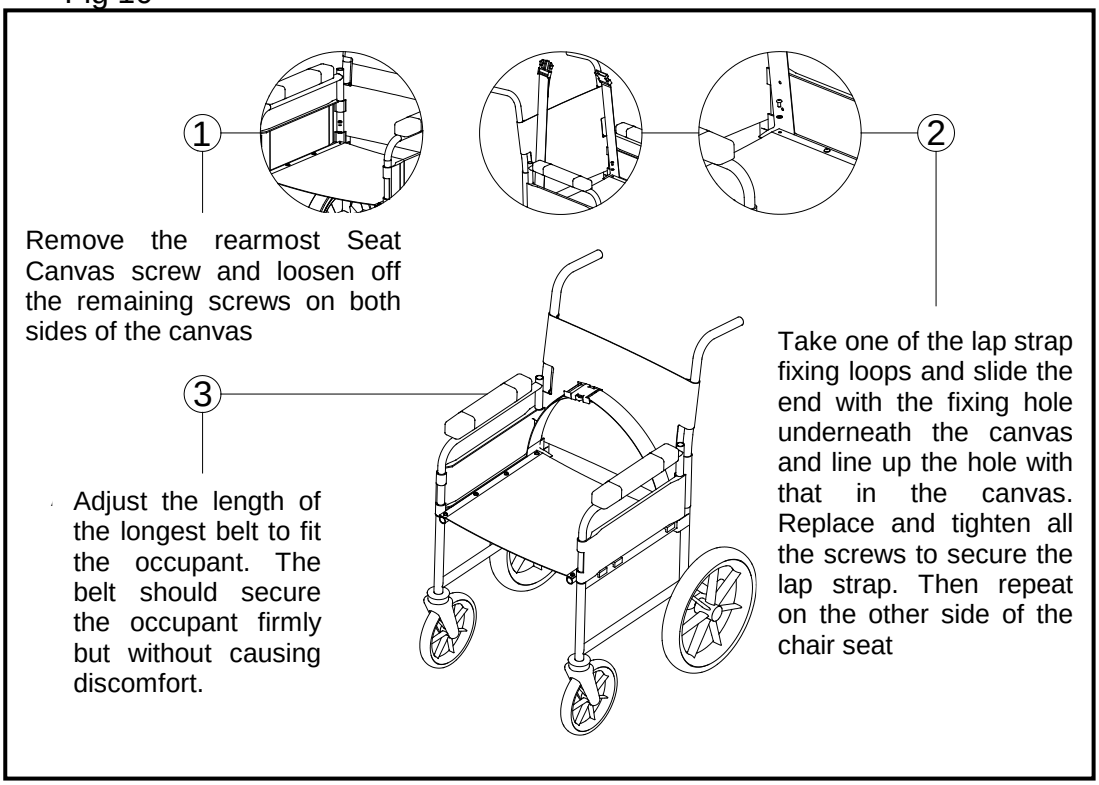
Transportation, crash tested restraints for both wheelchair and occupant are part of the actual vehicle equipment, and must be secured to the vehicle itself, as shown in Fig.12 See section 2.10 of this General Guide for more details.

N.B. The loop must be fitted in such a way that the eyelet is underneath, and the loop uppermost, to prevent possible contact with the wheel (Fig 10 ②). The belt must be fitted in one piece, go around the client and must pass behind the push handle tubes of the wheelchair.

Clean if required, using a damp cloth with a small amount of washing up liquid. Rinse with a clean damp cloth.

All of our belts have flame retardant properties.

Fig 10


1
2
3
Remove the rearmost Seat Canvas screw and loosen off the remaining screws on both sides of the canvas
Take one of the lap strap fixing loops and slide the end with the fixing hole underneath the canvas and line up the hole with that in the canvas. Replace and tighten all the screws to secure the lap strap. Then repeat on the other side of the chair seat
Adjust the length of the longest belt to fit the occupant. The belt should secure the occupant firmly but without causing discomfort.

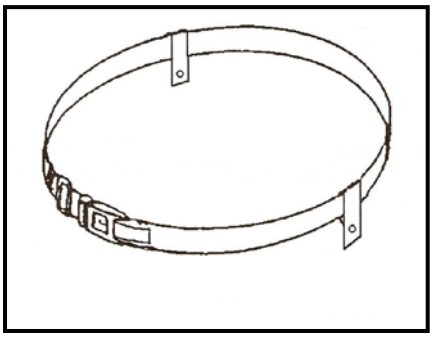


Fig 11

Belt with twin webbing loops shown in the correct orientation

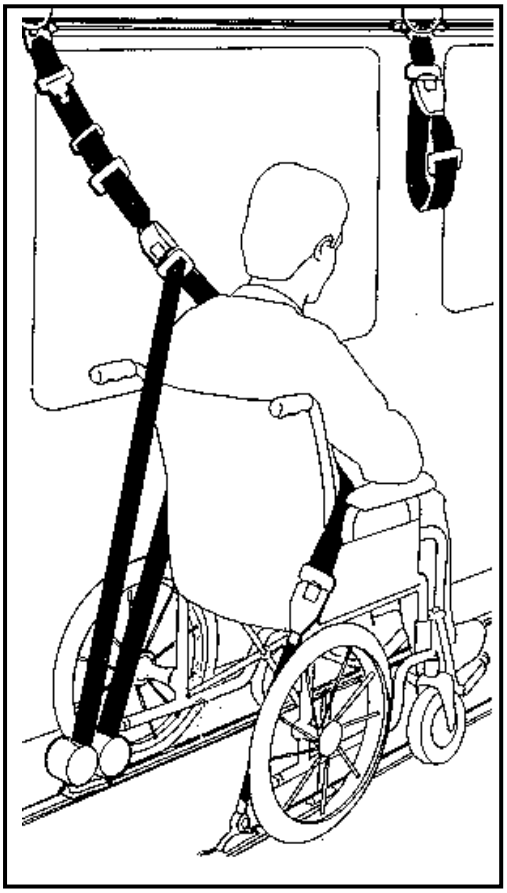


Fig 12

WARNING – DO NOT disassemble, shorten cut or drill this retaining belt, it could seriously compromise the belts integrity and invalidate any manufacturers warranty.

2.9 OCCUPANT CONTROLLED MOBILITY

Handrims

These are provided for the occupant to grip and push round to propel the wheels. Best results will be obtained by a long pushing stroke, which gives a continuous and smooth forward motion. Many users find that gripping across the tyre and handrim at the same time gives better control. We recommend that when operating in this way, wheelchair gloves are worn. Users with gripping difficulties may find larger section or Capstan types, with easy grip features, more practical.

When using a handrim to turn a chair round in a tight space, push one wheel forward, whilst pulling the other wheel backwards. Always make sure when carrying out this manoeuvre, that there are no obstructions or bystanders in the turning space required.

Balance Training

Physically active, independent people require wheelchairs, which allow them to safely negotiate kerbs and achieve efficient control and manoeuvrability. It can be hazardous for an occupant to attempt wheelie positions on wheelchairs, which are stable above 10 degrees rearwards static stability, as physical effort needed to manoeuvre and pull a wheelie can be excessive, consequently increasing the risk of accidentally tipping over backwards.

Maximum efficiency of hand propulsion occurs when occupant centre of gravity and wheel centre coincide, and is dependent on the occupant shape and size. Physically active people should have wheelchairs with fine wheel position balance settings, i.e. below 10 degrees rearward stability. These chairs should have rear stabilisers when supplied to inexperienced users, allowing the user to practice balancing techniques with the reassurance that the chair will not accidentally tip over backwards.

During training, the Therapist, or Training Supervisor can therefore build up the confidence of the occupant in stages, by initially setting the wheelchair up in a safe balance position, with the stabilisers acting positively, and progressing gradually towards optimum performance settings, with the stabilisers only acting as a back up.

Once satisfied that the occupant has developed the full range of wheelchair skills, and provided that the medical condition is not compromised, the therapist can authorise removal of the stabilisers, and the occupant then takes full responsibility and control of the wheelchair.

STABILISERS ARE FOR OCCUPANT SAFETY
THEY SHOULD NOT BE REMOVED UNTIL THE USER IS ABLE TO DEAL WITH BACKWARD FALLS AND TIP OUTS.

If stabilisers are removed for ascending or descending a flight of steps additional carers and handlers should be present, and they should be refitted when the manoeuvre has been completed.

Outdoor Safety Hints

Most pavements slope slightly towards the kerb and the wheelchair may have a tendency to pull towards the road. Occupant controlled Active User wheelchairs with cambered wheel setting reduce this tendency.

The fitting of polyurethane tyres eliminates punctures, and provides reassurance of not being stranded some distance from a service centre, but the use of these tyres imposes a harder ride and the wheels must be checked more frequently, to ensure that there is no deterioration of spoke tension and security. Polyurethane tyres have slightly less grip than pneumatic tyres, therefore, self propelled chairs fitted with polyurethane tyres are also fitted with a high friction brake shoe grip.

When out at night, ensure that both you and your wheelchair are visible, consider both clothing, and light reflective trim features.

Movement & Stability

A little journey forward planning can eliminate difficult manoeuvres such as steps. Modern public buildings should provide permanent wheelchair ramps, with a practical slope angle, built according to regulations, for safe access.

Technical Test data on stability of wheelchairs should be seen as a tool for comparison. Data does not convey actual feel of the wheelchair in the intended environment. Initial supervised user training and assessment by a rehabilitation professional, with the wheelchair in the intended usage environment is recommended, and users should ensure that they are confident with regard to this aspect of use.

An important factor in considering accessibility and slopes is the effort demanded from the occupant or attendant using the chair. Pushing up a steep slope which extends over a distance, may create a need to stop and rest, which in turn demands additional and undesirable effort to start back upwards again. Stopping a wheelchair on a steep downward slope also demands effort and control, and surface conditions need to be taken into account when deciding what outdoor route to take. Manoeuvres, which demand over exertion, may create risk of injury to the user and should be avoided. However, if in temporary difficulty, wheelchair users should not hesitate in asking for assistance from people nearby, someone will usually be happy to help.

Modern buildings should have slopes built to a required standard angle, but this is not the case with all access areas. Learning the geography of an area is important. As an all round guide, a maximum

safe slope of 8 degrees is our recommendation for the R Healthcare range of manually propelled wheelchairs. However this recommendation may need to be changed if the wheelchair has attachments added to it, such as an elevating legrest or carry bag, which adversely affects stability. Such changes to the chair specification may have a critical effect, and they require re-assessment by a rehabilitation professional.

SAFE SLOPE OF 8 DEGREES FOR MANUAL WHEELCHAIRS.

Where possible, the hazard of negotiating steps should be avoided. Many falls and injuries to both occupant and helper can occur when inexperienced people are carrying out this operation, and if users or carers are concerned about a particular hazard in the usage environment, which they must regularly overcome, they should consult their wheelchair rehabilitation service, or community services department., as appropriate.

There may still be occasions when steps must be negotiated. In the event of the chair having detachable pushing handles, these should be checked for security in the locked in position before attempting this manoeuvre. Stabilisers may require removal if they interfere with the chair balance angle on a flight of steps. This should first be checked out with an unoccupied chair.

2.10 TRANSPORTATION

Wherever possible it is recommended that wheelchair occupants transfer to a vehicle seat during a journey, with the wheelchair securely stored separately in a purpose made storage area.

Stowing the wheelchair in a car boot

The folded chair should be placed close to the car boot with armrests, footrests and other removable parts detached to split total weight into component form. Wheelchairs with detachable wheels reduce the weight for lifting. The person stowing the chair should grip convenient fixed parts of the chair, and lift keeping the back straight, bending from the hips and knees. If in any doubt about handling the weight, assistance should be sought.

If stowing proves difficult due to weight or space limitations, a compact folding wheelchair such as the R Healthcare Stowaway may provide a practical and additional alternative for transit purposes and occasional use

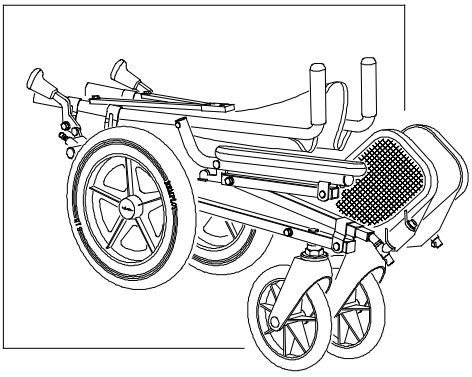


Figure 12 R Healthcare Stowaway

Car Driver Information

Physically active wheelchair users can drive cars and store the wheelchair in the car independently, with a lot of practice. Training at specialist driving centres is recommended. Two door cars provide the greatest access space. Gaining entry to the car first involves side transfer as section 3. When carrying this manoeuvre a wheelchair users should chose a position where there is no risk of interference from other traffic.

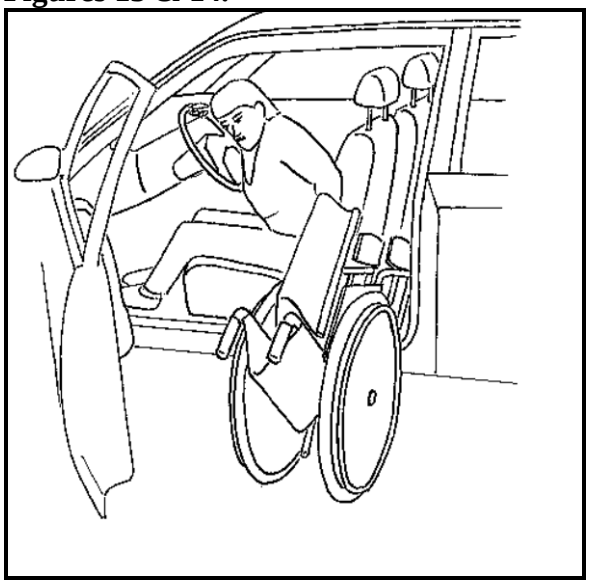
The stored wheelchair requires locating not only so that the driver can reach it, but also to remain safely secured during the journey.

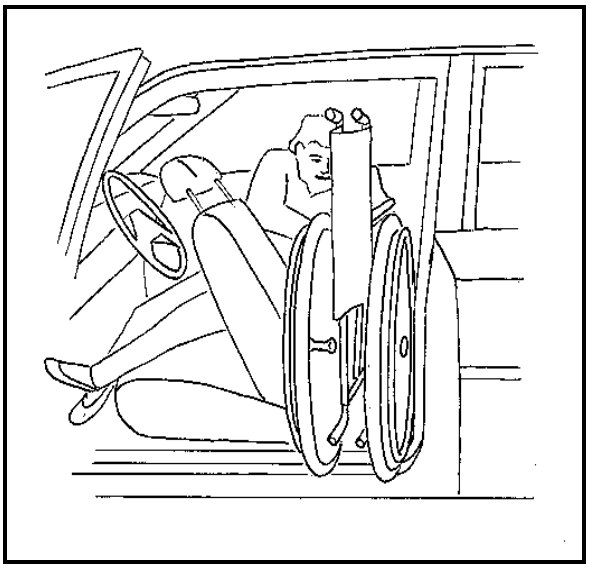
With sideways folding wheelchairs the driver should pull the folded wheelchair into the vehicle into space behind driver or passenger seat. **see figs 13 &14.**

Fixed frame wheelchairs, with quickly detachable wheels can be disassembled once the driver has transferred into the car. The parts then being stored safely within the vehicle.

It is recommended that wheelchairs stored on the front passenger seat are secured using the car seat belt through the frame. A wheel bag may be useful for long journeys or for keeping dirt away from the car seating area. When there is another able bodied passenger present, the storing options as section 9.1 are recommended.

Figures 13 & 14.





A Sideways Folding wheelchair can be stored behind the front seat.

Guidelines for Wheelchair & Occupant Transportation in Vehicles
This information is given in order to reduce the risk of bad practice. It is based on current available knowledge. Wheelchair users and transport operators have a responsibility to ensure that safety measures take account the needs of wheelchair occupants and other passengers to minimise the risks involved for each individual situation. Vehicles transporting wheelchair occupants should have safe, secure wheelchair access, transport operators should recognise this. Available publications are MDD Report No 92/07, and Dept of Transport Code of Practice VSE 87/1.

Public Transport
Wheelchair users who choose to travel in a local bus or public service vehicle should recognise that this involves risk, and a complexity of related issues. The user has a responsibility to make the decision of how to travel carefully. Pre journey planning will avoid difficult access situations, which could be encountered later, when it is too late to do anything about it. In busy, congested areas, users will require skill to avoid collisions with other passengers, when approaching and boarding the vehicle. Wheelchair brakes may not hold a chair and occupant stable against inertia forces of normal traffic conditions, such as cornering or coming to a halt, and wheelchairs in vehicles should be prevented from moving by other means. Dept of Transport approved designated wheelchair areas in low floor buses with support pillars and hand rails at wheelchair height are the most suitable. Users are advised to check availability of wheelchair facilities with the transport vehicle operator, and note time schedules.

Specialised Transport for Wheelchair Occupants.
These vehicles should be fitted with approved restraint systems. Dept of Transport approved taxis for individuals are available, but users with neck problems are advised to check that there is adequate headroom.
Restraint systems for minibuses range from wheelchair tie downs, to more compact foldaway devices. Installers and operators of vehicles with restraint systems must be trained in their correct use by the restraint manufacturer, or approved mobility specialist. The CTA can provide useful advice. R Healthcare are participating in the creation of new safety standards in this area through membership of BSTA, in co-operation with the Dept of Transport & B.S I.

The wheelchair must be secured to the floor by a restraint system, preferably in line with direction of travel. see **Fig15**. The wheelchair should not be occupied by more than one person. Fittings such as trays, should be stowed separately.
Wheelchairs used for transportation of occupants in vehicles should have a full height backrest of at least 415 mm for adults, head supports are recommended.

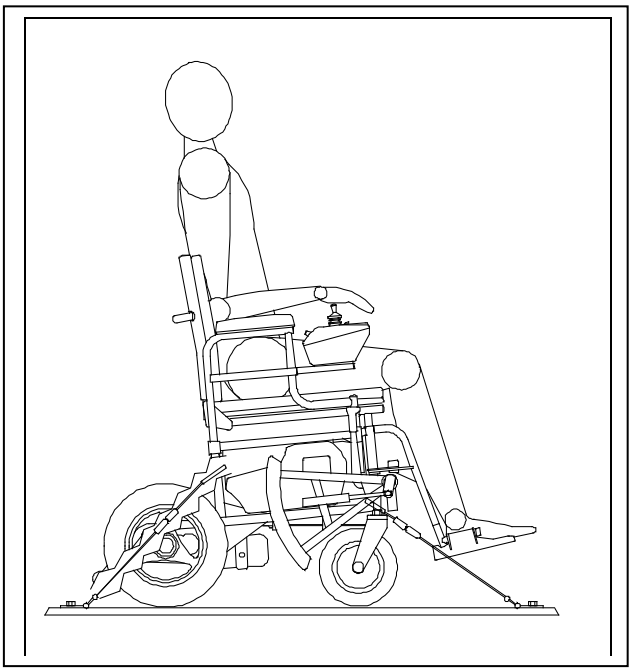


Fig 15
Side view of R Healthcare Powerider tied down to floor of a vehicle using webbing restraints. Note that separate occupant crash tested restraint is not shown in this view.

Wheelchair Seat Belts and Posture Belts are not crash tested restraints, although they help keep an occupant in a preferred position during normal vehicle motion. To meet crash safety standards, wheelchair and occupant must be secured to the vehicle independently. The occupant restraint should be secured directly to the vehicle at a point above shoulder height. No component of a wheelchair restraint should pass through the wheels. Wheelchair restraints should secure the wheelchair in such a manner that they cannot become free if chair components deform, or if one or more tyres deflate. Under no circumstances should wheelchairs be modified or strained to allow installation of clamps or fittings.

2.11 FIRE PRECAUTIONS

DISABLED PERSONS ARE AT GREATER RISK THAN OTHERS IN THE EVENT OF A FIRE. THE ENVIRONMENT IN WHICH A WHEELCHAIR IS USED SHOULD INCORPORATE SAFETY PRECAUTIONS TO MINIMISE FIRE RISK TO WHEELCHAIR OCCUPANTS

When using the chair, both indoors and outside, always take precautions against fire risks. Avoid smoking, and do not park the wheelchair against an open fire, or intense heat source. Bear in mind that the temperatures reached in a hatchback car on a hot day can cause stored wheelchair component parts to become too hot to handle. When parking, the pusher should position the chair so that the occupant can see and communicate as well as possible. In buildings check that fire exits and procedures are understood.

2.12 GENERAL PRECAUTIONS & INFORMATION

Warranty

R Healthcare guarantees the products supplied to be free from manufacturing defects, and will replace components where necessary free of charge, for a period of 24 months from the date of purchase. This guarantee is subject to the condition that the product has been used, adjusted and maintained in accordance with the user and maintenance instructions supplied by R Healthcare.

UNAUTHORISED WHEELCHAIR MODIFICATIONS MAKE THIS WARRANTY VOID.
R HEALTHCARE ARE NOT RESPONSIBLE FOR ANY ACCIDENT RESULTING FROM SUCH UNAUTHORISED MODIFICATIONS.

This does not affect your statutory rights. A more complete warranty statement is available on request from Authorised Distributor or Disablement Service Centre.

Service

Service Records should be completed by the Authorised Distributor Servicing Department and retained by the user as a reference. Service checks should be carried out by the Authorised Distributor at the recommended interval specified on the Service Record. Batch code and serial numbers are essential for the specification of spare parts. If in doubt, your Authorised Dealer or Rehabilitation Specialist will be able to provide help and professional advice on correct and safe use of wheelchairs. There are also many national and local organisations, which will be pleased to provide help and advice for wheelchair users.

All R Healthcare wheelchairs are designed with the needs of disabled people in mind. We hope that our wheelchairs provide their users with the reliability, freedom or independence they need for a more improved lifestyle.

R Healthcare Healthcare Group has a policy of constant product improvement and reserves the right to change specifications without prior notice.

This guide contains information of a general nature. All models and attachments have specific features and will have additional information provided showing correct operation method.

2.13 LOOKING AFTER YOUR WHEELCHAIR - GENERAL CARE AND MAINTENANCE

READ ALL INFORMATION PROVIDED BEFORE ATTEMPTING TO USE

Users should not attempt major repairs or modifications. Approved Distributors have full Service Information and are able to advise if the chair becomes damaged, requiring major part replacement, or refitting. If in any doubt about service requirements, contact the Approved Distributor The R Healthcare Customer Services Dept is also available for more information The Service Record included with this Information Guide, has details of model references to be quoted when Service Information is requested.

Frequency of distributor service maintenance depends on usage level. We recommend that chairs are checked by the distributor at assessed intervals, according to the level of use and usage environment. Warranty can be affected if a wheelchair is not adequately maintained.

Users should note that wheelchairs retain appearance if looked after and cleaned regularly, referring to the list below for routine maintenance and safety checks, which they are responsible for.

Information received from upholstery manufacturer

The fabric used for wheelchair upholstery is easily cleaned in-situ. However, as there are some substances which may affect the material, careful attention to REGULAR cleaning will not only prolong its life but will ensure that its appearance is maintained.

Resistance to stains and chemicals

The upholstery is resistant to most mild acids, alkalis and household stains. Some substances such as ball-point pen ink, lipstick, newsprint and food colourings may be absorbed by the vinyl and cause permanent staining. This can often be minimised by immediate cleaning with a damp, soapy cloth or sponge

Cleaning

To maintain its appearance, the fabric should be cleaned REGULARLY to remove fatty substances in soiling, which may reduce its service life. Light soiling can be removed by adding a small amount of washing up liquid to some warm water and then applying to the fabric with a cloth. Rinse off with clean water before allowing to dry. If need be, a Mild solution of antiseptic can be applied to the fabric.

Do not use

Chemical bleaching materials, abrasive cleaners, wax polishes or aerosol spray polishes. The use of these substances is likely to be harmful to PVC laminates and repeated use can result in the removal of plasticiser from the PVC compound which will result in hardening and subsequent cracking of the material's surface.

2.14 SERVICE CHECK LIST

Brakes	The brake should hold the chair on a ramp angle of approx. 10 degrees. Try the chair on a slope or ramp, which you may use. If necessary, have the brake is readjusted.
Wheels	Check general condition, free running and clearance in hubs, wheel wobble of 3mm measured at rim is acceptable, excessive movement is an indication of wear. Chairs fitted with puncture free tyres in particular will require frequent checks on spoke security, and any spoke looseness or other fault should be brought to the attention of the Approved Distributor.
Tyres	Ensure correct tyre pressure, and tread condition. Valves are Schrader (as cars), pressure is 45 psi (3 Bar or 300 Kilo pascals). To avoid risk of over inflation, we do not recommend use of high pressure airlines. Badly worn tyres should be replaced.
Handrims	Check security of fixing, and damage to surface which could cause cut fingers
Moving Parts	Occasional lubrication of sliding parts and pivots. We recommend the use of a none toxic lubricant is used eg Superlube Plus (from Lubrication Services) which is FDA approved for food use, will allow easy operation.
Upholstery	The upholstery should be wiped with a damp cloth. Marks can be removed using a mild detergent. Pressure washing is not recommended. Damage should be repaired before it causes problems. A slight catch in the upholstery may result in a longer tear if not dealt with when it first occurs.
Frame and Fittings	Paint work can be protected using a proprietary car wax polish. Check that all detachable parts latch in correctly and positively, particularly push handles, footrests, armrests and stabilisers where appropriate.
Handgrips	Ensure that the Handgrips are secure. If grips are loose or damaged the wheelchair is unsafe and the grips must be replaced. Replacement grips and method of fitting must be to R Healthcare approved specification.

2.15 Technical Data Sheets

Positive Momentum

TECHNICAL INFORMATION CE

RANGE **ACCESS** JUNIOR AND ADULT MANUAL WHEELCHAIRS

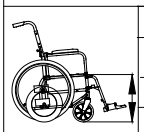
OCCUPANT WEIGHT RANGE 50Kg TO 127Kg

KG

GENERAL PURPOSE FOR JUNIOR OR ADULT OCCUPANTS CONFIGURABLE TO ATTENDANT OR OCCUPANT PROPULSION. FOR INDOOR AND OUTDOOR USE IN PUBLIC ACCESS AREAS. SUITABLE AS A TRANSPORT VEHICLE SEAT WITH APROVED RESTRAINTS

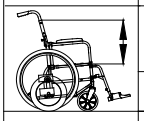
SEATING AREA DIMENSIONS

RANGE AND SEAT WIDTH REFERENCE NUMBER, COVERING ALL GENERIC CONFIGURATIONS	SERVICE FRAME REFERENCE inch		ISO 7176 EFFECTIVE MEASUREMENTS mm	
	WIDTH	DEPTH	WIDTH	DEPTH
□6J	13	15	365	415
□6J	14	15	390	415
□6J	15	16	415	440
□6J	16	16	440	440
□6A	17	17	490	465
□6A	18	17	490	465
□6A	19	17	515	465



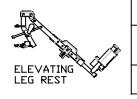
SEAT FRONT EDGE TO GROUND HEIGHT

CONFIG.	SERVICE (FRAME) REFERENCE (inch)	EFFECTIVE (CENTRE) MEASUREMENTS (mm)
□6A/J	19	450 INCLUDING SAG
□6A/J LOW	17	400 INCLUDING SAG



BACKREST HEIGHT - 430mm MEASURED FROM SEAT TO TOP OF CANVAS AT FRAME

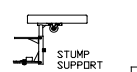
FOOTREST INFORMATION



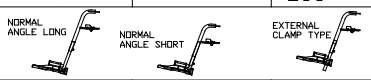
ELEVATING LEG REST

PRIMARY LEG TO SEAT RELATIONSHIPS

TYPES	LEG ANGLE	HEIGHT RANGE FROM SEAT(mm)
STANDARD	90° FIXED	-235 - -375

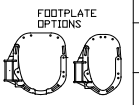


STUMP SUPPORT



NORMAL ANGLE LONG — NORMAL ANGLE SHORT — EXTERNAL CLAMP TYPE

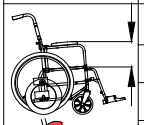
ELEV. LEG REST	120° - 180°	N/A
STUMP SUPPORT	180° FIXED	0 - +80



FOOTPLATE OPTIONS

SWIVEL FOR SIDE TRANSFER DETACHABLE FOR LIFTING

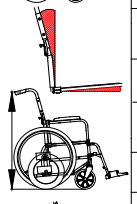
ARMREST INFORMATION



HEIGHT OF DETACHABLE ARMRESTS (mm)

UNIVERSAL AMD TRAY		255
DESK ADJUSTABLE		HEIGHT RANGE 255 - 315

FRAME / SEAT ANGLE INFORMATION



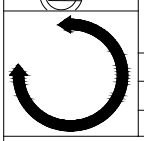
BACKREST ANGLE FROM VERTICAL 5° TO 25° REARWARD

FRAME ANGLE FROM HORIZONTAL 5° TO 7° DEPENDANT ON WHEELBASE

06PA	925	ADJUSTABLE OPTION	925 TO 1000
06PA LOW	875		875 TO 950

CORRIDOR WIDTH TURNING SPACE

WITH ATTENDANT BEHIND

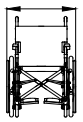


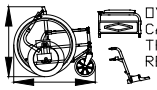
MODEL	THROUGH 180° BETWEEN WALLS
06H18 SP	1300
06H18 ATT	1200

DATA BASED ON ISO 7176 TESTS & MEASUREMENTS ON BASIC FACTORY BUILD SPECS. WITHOUT INCLUSION OF ANY ADAPTATION. INFORMATION GIVEN IS FOR COMPARISON AND GUIDANCE, NOT A MANUFACTURING STANDARD. USER TRIAL RECOMMENDED

WWW.REMPLOYHEALTHCARE.COM

OVERALL DIMENSIONS





OVER ALL DIMENSIONS CAN BE REDUCED FROM THESE FIGURES BY REMOVAL OF QD WHEELS

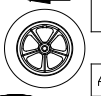
DESCRIPTION AND SEAT WIDTH REF.		CHAIR OPEN (mm)			CHAIR FOLDED (mm)		
		WIDTH	LENGTH	HEIGHT	WIDTH	LENGTH	HEIGHT
OCCUPANT MODELS	□6J13	550	990	940	280	730	685
	□6J14	575	990	940	280	730	685
	□6J15	600	990	940	280	730	685
	□6J16	625	990	940	280	730	685
	□6A17	650	1040	940	280	730	685
	□6A18	675	1040	940	280	730	685
	□6A19	700	1040	940	280	730	685
ATTENDANT MODELS	□6J13	510	940	940	240	605	685
	□6J14	535	940	940	240	605	685
	□6J15	560	940	940	240	605	685
	□6J16	585	940	940	240	605	685
	□6A17	610	990	940	240	655	685
	□6A18	635	990	940	240	655	685
	□6A19	660	990	940	240	655	685

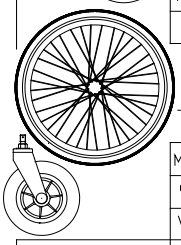
WHEEL BASE CASTORS TRAILING

WHEELBASE RANGE ACCROSS ALL MODELS 13"-19"

330mm SMALLEST JUNIOR TO 480mm LARGEST ADULT

REAR WHEEL INFORMATION





DIMENSION	Ø mm			WIDTH (mm)
ATTENDANT PROPELLED	315 ONLY			40
OCCUPANT PROPELLED	510	560	610	31 or 25
TYRE	CHOICE- PUNCTURE FREE OR PNEUMATIC			

CASTOR INFORMATION

MOUNTING - FIXED M14 & TYRE - MCP PUNCTURE FREE

Ø mm	125	LOW SEAT AND MODULAR	190	200	STANDARD SEAT AND MODULAR
WIDTH	40		25	32	

K KG

WEIGHT INFORMATION

MEASUREMENT	ATTENDANT	SP FIXED	SP DETACH
TOTAL WEIGHT	17.5Kg	19Kg	19Kg
WEIGHT FOR LIFTING	13.5Kg	15Kg	10.5Kg

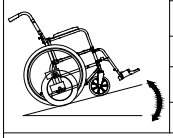
OBSTACLES AND ENVRIONMENTS

SAFE SLOPE FOR MANUAL CHAIRS IS BASED UPON ABILITY OF OCCUPANT OR ATTENDANT TO CONTROL THE CHAIR ON A SLOPE IN ALL DIRECTIONS. 8 DEGREES

ISO 7176 IMPACT STRENGTH & DYNAMIC TESTS

TRANSPORT COMPATIBLE
CRASH TESTED AT 48Kmph/30mph
APPROVED FOR USE WITH WEBBING TIE-DOWN & OCCUPANT RESTRAINT SYSTEM (WTORS) NOT CLAMPS

200,000 CYCLES TWO DRUM
6,666 CYCLES KERB DROP



STATIC STABILITY RANGE (BRAKES ON)

MODEL AND CONFIG.	FORWARDS	BACKWARDS	SIDEWAYS
ACCESS S/P MODEL 06A17	15° - 12.5° SLIDES	9° - 18°	18.5°
ACCESS ATT MODEL 06A17	15° - 13° SLIDES	9° - 18°	17.5°

RANGE **ACCESS** HEAVY DUTY ADULT WHEELCHAIRS

OCCUPANT WEIGHT RANGE 50Kg TO : 160KG

KG

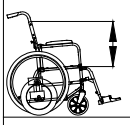
GENERAL PURPOSE FOR JUNIOR OR ADULT OCCUPANTS CONFIGURABLE TO ATTENDANT OR OCCUPANT PROPULSION. FOR INDOOR AND OUTDOOR USE IN PUBLIC ACCESS AREAS. SUITABLE AS A TRANSPORT VEHICLE SEAT WITH APROVED RESTRAINTS

SEATING AREA DIMENSIONS

RANGE AND SEAT WIDTH REFERENCE NUMBER. COVERING ALL GENERIC CONFIGURATIONS	SERVICE FRAME REFERENCE inch		ISO 7176 EFFECTIVE MEASUREMENTS mm	
	WIDTH	DEPTH	WIDTH	DEPTH
06H	18	17	490	460
06H	19	17	515	460
06H	20	17	540	460
06H	22	17	590	460
06H	24	17	645	460

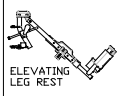
SEAT FRONT EDGE TO GROUND HEIGHT

CONFIG.	SERVICE (FRAME) REFERENCE (inch)	EFFECTIVE (CENTRE) MEASUREMENTS (mm)
06H	19.25	480 INCLUDING SAG AND CUSHION
06H LOW	17	430 INCLUDING SAG AND CUSHION



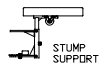
BACKREST HEIGHT - 430mm
MEASURED FROM SEAT TO TOP OF CANVAS AT FRAME

FOOTREST INFORMATION

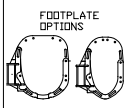


PRIMARY LEG TO SEAT RELATIONSHIPS

TYPES	LEG ANGLE	HEIGHT RANGE FROM SEAT(mm)
STANDARD	90° FIXED	-234 - -375

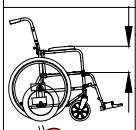


ELEV. LEG REST	120° - 180°	N/A
STUMP SUPPORT	180° FIXED	0 - +80

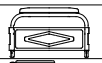
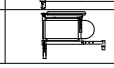


SWIVEL FOR SIDE TRANSFER
DETACHABLE FOR LIFTING

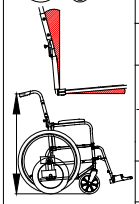
ARMREST INFORMATION



HEIGHT OF DETACHABLE ARMRESTS (mm)

UNIVERSAL AND TRAY			255
DESK ADJUSTABLE			HEIGHT RANGE 255 - 315

FRAME / SEAT ANGLE INFORMATION



BACKREST ANGLE FROM VERTICAL 5° TO 25° REARWARD

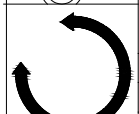
FRAME ANGLE FROM HORIZONTAL 5° TO 7° DEPENDANT ON WHEELBASE

06PA	925	ADJUSTABLE OPTION	925 TO 1000
06PA LOW	875		875 TO 950

*UNIVERSAL BRACKET REINFORCED BRACE OPTION INCREASES CARRYING CAPACITY FROM 136Kg TO 146Kg

CORRIDOR WIDTH TURNING SPACE

WITH ATTENDANT BEHIND



MODEL	THROUGH 180° BETWEEN WALLS
06H18 SP	1300
06H18 ATT	1200

DATA BASED ON ISO 7176 TESTS & MEASUREMENTS ON BASIC FACTORY BUILD SPECS. WITHOUT INCLUSION OF ANY ADAPTATION. INFORMATION GIVEN IS FOR COMPARISON AND GUIDANCE, NOT A MANUFACTURING STANDARD. USER TRIAL RECOMMENDED

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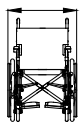
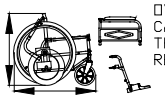
OVERALL DIMENSIONS





OVER ALL DIMENSIONS CAN BE REDUCED FROM THESE FIGURES BY REMOVAL OF QD WHEELS

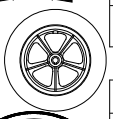
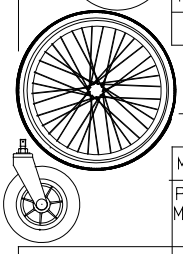
DESCRIPTION AND SEAT WIDTH REF.		CHAIR OPEN (mm)			CHAIR FOLDED (mm)		
		WIDTH	LENGTH	HEIGHT	WIDTH	LENGTH	HEIGHT
OCCUPANT MODELS	06H18	675	1040	940	280	785	690
	06H19	700	1040	940	280	785	705
	06H20	725	1040	940	280	785	720
	06H22	775	1040	940	280	785	750
	06H24	825	1040	940	280	785	780
OCCUPANT MODELS	06H18	675	995	940	240	660	690
	06H19	700	995	940	240	660	705
	06H20	725	995	940	240	660	720
	06H22	775	995	940	240	660	750
	06H24	825	995	940	240	660	780

WHEEL BASE CASTORS TRAILING

WHEELBASE RANGE ACROSS ALL MODELS 18"-24"

380mm SMALLEST ADULT TO
480mm LARGEST ADULT

REAR WHEEL INFORMATION

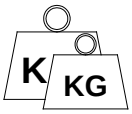



DIMENSION	Ø mm	WIDTH
ATTENDANT PROPELLED	315 ONLY	40
OCCUPANT PROPELLED	510 560 610	31 OR 25
TYRE	CHOICE- PUNCTURE FREE OR PNEUMATIC	

CASTOR INFORMATION

MOUNTING - FIXED M14 & TRYE - MCP PUNCTURE FREE			
PLASTIC MOULDED FORK	Ø mm	190	200
	WIDTH	50	45

WEIGHT INFORMATION



MEASUREMENT	ATTENDANT	SP FIXED	SP DETACH
TOTAL WEIGHT	18.5Kg	20Kg	20Kg
LIFTING WEIGHT	14.5Kg	16Kg	11.5Kg

OBSTACLES AND ENVRIONMENTS

SAFE SLOPE FOR MANUAL CHAIRS IS BASED UPON ABILITY OF OCCUPANT OR ATTENDANT TO CONTROL THE CHAIR ON A SLOPE IN ALL DIRECTIONS. 8 DEGREES

ISO 7176 IMPACT STRENGTH & DYNAMIC TESTS

TRANSPORT COMPATIBLE
CRASH TESTED AT 48Kmph/30mph
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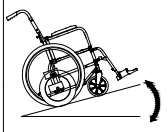
200,000 CYCLES TWO DRUM
6,666 CYCLES KERB DROP



STATIC STABILITY RANGE (BRAKES ON)

MODEL 06H18	FORWARDS	BACKWARDS	SIDEWAYS
ACCESS S/P	15° TO 12.5° SLIDES	9° TO 18°	18.5°
ACCESS ATT	15° TO 13° SLIDES	9° TO 18°	17.5°

RANGE **ACCENT** ADULT MANUAL WHEELCHAIRS

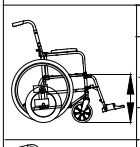
OCCUPANT WEIGHT RANGE 50Kg TO 127Kg

KG

GENERAL PURPOSE FOR ADULT OCCUPANTS CONFIGURABLE TO ATTENDANT OR OCCUPANT PROPULSION. FOR INDOOR AND OUTDOOR USE IN PUBLIC ACCESS AREAS. SUITABLE AS A TRANSPORT VEHICLE SEAT WITH APROVED RESTRAINTS

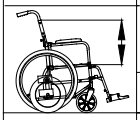
SEATING AREA DIMENSIONS

RANGE AND SEAT WIDTH REFERENCE NUMBER. COVERING ALL GENERIC CONFIGURATIONS	SERVICE FRAME REFERENCE inch		ISO 7176 EFFECTIVE MEASUREMENTS mm	
	WIDTH	DEPTH	WIDTH	DEPTH
□7A	17	19	490	515
□7A	18	19	490	515
□7A	19	19	515	515



SEAT FRONT EDGE TO GROUND HEIGHT

CONFIG.	SERVICE (FRAME) REFERENCE (inch)	EFFECTIVE (CENTRE) MEASUREMENTS (mm)
□7A	19	450 INCLUDING SAG
□7A LOW	17	400 INCLUDING SAG

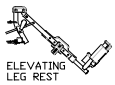


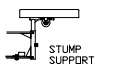
BACKREST HEIGHT - 430mm MEASURED FROM SEAT TO TOP OF CANVAS AT FRAME

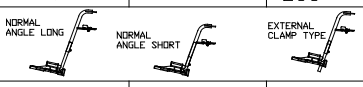
FOOTREST INFORMATION

PRIMARY LEG TO SEAT RELATIONSHIPS

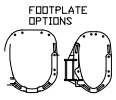
TYPES	LEG ANGLE	HEIGHT RANGE FROM SEAT(mm)
STANDARD	90° FIXED	-235 - -375





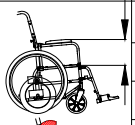


ELEV. LEG REST	120° - 180°	N/A
STUMP SUPPORT	180° FIXED	0 - +80



SWIVEL FOR SIDE TRANSFER
DETACHABLE FOR LIFTING

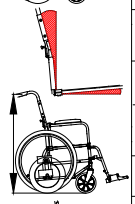
ARMREST INFORMATION



HEIGHT OF DETACHABLE ARMRESTS (mm)

UNIVERSAL AMD TRAY		255
DESK ADJUSTABLE		HEIGHT RANGE 255 - 315

FRAME / SEAT ANGLE INFORMATION



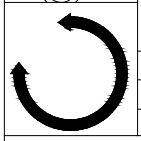
BACKREST ANGLE FROM VERTICAL 5° TO 25° REARWARD

FRAME ANGLE FROM HORIZONTAL 5° TO 7° DEPENDANT ON WHEELBASE

07A	925	ADJUSTABLE OPTION	925 TO 1000
07A LOW	875		875 TO 950

CORRIDOR WIDTH TURNING SPACE

WITH ATTENDANT BEHIND



MODEL	THROUGH 180° BETWEEN WALLS
07A18 SP	1300
07A18 ATT	1200

DATA BASED ON ISO 7176 TESTS & MEASUREMENTS ON BASIC FACTORY BUILD SPECS. WITHOUT INCLUSION OF ANY ADAPTATION. INFORMATION GIVEN IS FOR COMPARISON AND GUIDANCE, NOT A MANUFACTURING STANDARD. USER TRIAL RECOMMENDED

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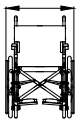
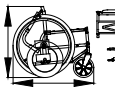
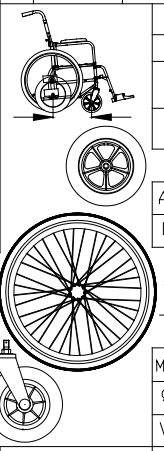


OVERALL DIMENSIONS



OVER ALL DIMENSIONS CAN BE REDUCED FROM THESE FIGURES BY REMOVAL OF QD WHEELS

	DESCRIPTION AND SEAT WIDTH REF.	CHAIR OPEN (mm) WIDTH	LENGTH	HEIGHT	CHAIR FOLDED (mm) WIDTH	LENGTH	HEIGHT
OCCUPANT MODELS	□7A17	650	1040	940	280	730	685
	□7A18	675	1040	940	280	730	685
	□7A19	700	1040	940	280	730	685
ATENDANT MODELS	□7A17	610	990	940	240	655	685
	□7A18	635	990	940	240	655	685
	□7A19	660	990	940	240	655	685



WHEEL BASE CASTORS TRAILING

WHEELBASE RANGE ACCROSS ALL MODELS 17"-19"

430mm SMALLEST ADULT TO 530mm LARGEST ADULT

REAR WHEEL INFORMATION

DIMENSION	Ø mm			WIDTH (mm)
ATTENDANT PROPELLED	315 ONLY			40
OCCUPANT PROPELLED	510	560	610	31 or 25
TYRE	CHOICE- PUNCTURE FREE OR PNEUMATIC			

CASTOR INFORMATION

MOUNTING - FIXED M14 & TYRE - MCP PUNCTURE FREE

Ø mm	125	LOW SEAT AND MODULAR	190	200	STANDARD SEAT AND MODULAR
WIDTH	40		25	32	

K KG

WEIGHT INFORMATION

MEASUREMENT	ATTENDANT	SP FIXED	SP DETACH
TOTAL WEIGHT	17.5Kg	19Kg	19Kg
WEIGHT FOR LIFTING	13.5Kg	15Kg	10.5Kg

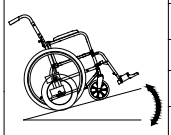
OBSTACLES AND ENVRIONMENTS

SAFE SLOPE FOR MANUAL CHAIRS IS BASED UPON ABILITY OF OCCUPANT OR ATTENDANT TO CONTROL THE CHAIR ON A SLOPE IN ALL DIRECTIONS. 8 DEGREES

ISO 7176 IMPACT STRENGTH & DYNAMIC TESTS

TRANSPORT COMPATIBLE
CRASH TESTED AT 48Kmph/30mph
APPROVED FOR USE WITH WEBBING TIE-DOWN & OCCUPANT RESTRAINT SYSTEM (WTORS) NOT CLAMPS

200,000 CYCLES TWO DRUM
6,666 CYCLES KERB DROP



STATIC STABILITY RANGE (BRAKES ON)

MODEL AND CONFIG.	FORWARDS	BACKWARDS	SIDEWAYS
ACCENT S/P MODEL 07A17	15° - 12.5° SLIDES	9° - 18°	18.5°
ACCENT ATT MODEL 07A17	15° - 13° SLIDES	9° - 18°	17.5°

DXP335-8

RANGE **ACCENT** HEAVY DUTY ADULT WHEELCHAIRS

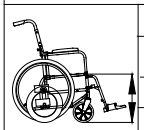
OCCUPANT WEIGHT RANGE 50Kg TO 160KG

KG

GENERAL PURPOSE FOR ADULT OCCUPANTS CONFIGURABLE TO ATTENDANT OR OCCUPANT PROPULSION. FOR INDOOR AND OUTDOOR USE IN PUBLIC ACCESS AREAS. SUITABLE AS A TRANSPORT VEHICLE SEAT WITH APROVED RESTRAINTS

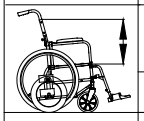
SEATING AREA DIMENSIONS

RANGE AND SEAT WIDTH REFERENCE NUMBER. COVERING ALL GENERIC CONFIGURATIONS	SERVICE FRAME REFERENCE inch		ISO 7176 EFFECTIVE MEASUREMENTS mm	
	WIDTH	DEPTH	WIDTH	DEPTH
□7H	18	19	490	515
□7H	19	19	515	515
□7H	20	19	540	515
□7H	22	19	590	515
□7H	24	19	645	515



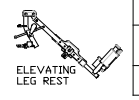
SEAT FRONT EDGE TO GROUND HEIGHT

CONFIG.	SERVICE (FRAME) REFERENCE (inch)	EFFECTIVE (CENTRE) MEASUREMENTS (mm)
□7H	19	450 INCLUDING SAG
□7H LOW	17	400 INCLUDING SAG



BACKREST HEIGHT - 430mm MEASURED FROM SEAT TO TOP OF CANVAS AT FRAME

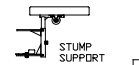
FOOTREST INFORMATION



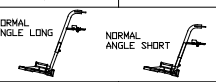
ELEVATING LEG REST

PRIMARY LEG TO SEAT RELATIONSHIPS

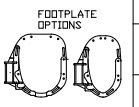
TYPES	LEG ANGLE	HEIGHT RANGE FROM SEAT(mm)
STANDARD	90° FIXED	-235 - -375



STUMP SUPPORT



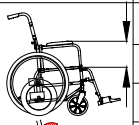
ELEV. LEG REST	120° - 180°	N/A
STUMP SUPPORT	180° FIXED	0 - +80



FOOTPLATE OPTIONS

SWIVEL FOR SIDE TRANSFER DETACHABLE FOR LIFTING

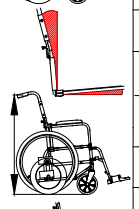
ARMREST INFORMATION



HEIGHT OF DETACHABLE ARMRESTS (mm)

UNIVERSAL AMD TRAY		255
DESK ADJUSTABLE		HEIGHT RANGE 255 - 315

FRAME / SEAT ANGLE INFORMATION



BACKREST ANGLE FROM VERTICAL 5° TO 25° REARWARD

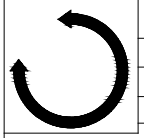
FRAME ANGLE FROM HORIZONTAL 5° TO 7° DEPENDANT ON WHEELBASE

□7H	925	ADJUSTABLE OPTION	925 TO 1000
□7H LOW	875		875 TO 950

*UNIVERSAL BRACKET REINFORCED BRACE OPTION INCREASES CARRYING CAPACITY FROM 136Kg TO 146Kg

CORRIDOR WIDTH TURNING SPACE

WITH ATTENDANT BEHIND



MODEL	THROUGH 180° BETWEEN WALLS
07H18 SP	1350
07H18 ATT	1250

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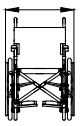
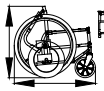
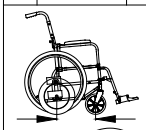
OVERALL DIMENSIONS





OVER ALL DIMENSIONS CAN BE REDUCED FROM THESE FIGURES BY REMOVAL OF QD WHEELS

DESCRIPTION AND SEAT WIDTH REF.		CHAIR OPEN (mm)			CHAIR FOLDED (mm)		
		WIDTH	LENGTH	HEIGHT	WIDTH	LENGTH	HEIGHT
OCCUPANT MODELS	□7H18	650	1040	940	280	785	690
	□7H19	675	1040	940	280	785	705
	□7H20	700	1040	940	280	785	720
	□7H22	775	1040	940	280	785	750
	□7H24	825	1040	940	280	785	780
ATENDANT MODELS	□7H18	675	995	940	240	660	690
	□7H19	700	995	940	240	660	705
	□7H20	725	995	940	240	660	720
	□7H22	775	995	940	240	660	750
	□7H24	825	995	940	240	660	780



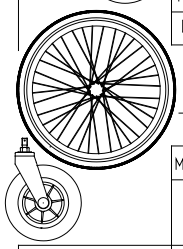
WHEEL BASE CASTORS TRAILING

WHEELBASE RANGE ACCROSS ALL MODELS 18"-24"

430mm SMALLEST ADULT TO 530mm LARGEST ADULT

REAR WHEEL INFORMATION

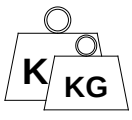
DIMENSION	Ø mm			WIDTH (mm)
ATTENDANT PROPELLED	315 ONLY			40
OCCUPANT PROPELLED	510	560	610	31 or 25
TYRE	CHOICE- PUNCTURE FREE OR PNEUMATIC			



CASTOR INFORMATION

MOUNTING - FIXED M14 & TYRE - MCP PUNCTURE FREE

PLASTIC MOULDED FORK	Ø mm	190	200
	WIDTH	25	32



WEIGHT INFORMATION

MEASUREMENT	ATTENDANT	SP FIXED	SP DETACH
TOTAL WEIGHT	18.5Kg	20Kg	20Kg
WEIGHT FOR LIFTING	14.5Kg	16Kg	11.5Kg

OBSTACLES AND ENVRIONMENTS

SAFE SLOPE FOR MANUAL CHAIRS IS BASED UPON ABILITY OF OCCUPANT OR ATTENDANT TO CONTROL THE CHAIR ON A SLOPE IN ALL DIRECTIONS.	8 DEGREES

ISO 7176 IMPACT STRENGTH & DYNAMIC TESTS

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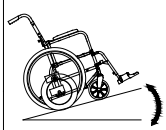
200,000 CYCLES TWO DRUM
6,666 CYCLES KERB DROP



STATIC STABILITY RANGE (BRAKES ON)

MODEL AND CONFIG.	FORWARDS	BACKWARDS	SIDEWAYS
ACCENT S/P MODEL 07H17	15° - 12.5° SLIDES	9° - 18°	18.5°
ACCENT ATT MODEL 07H17	15° - 13° SLIDES	9° - 18°	17.5°

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